

**FIGHT
TO
CLIMB**

VOLUME XXIV

PALMER

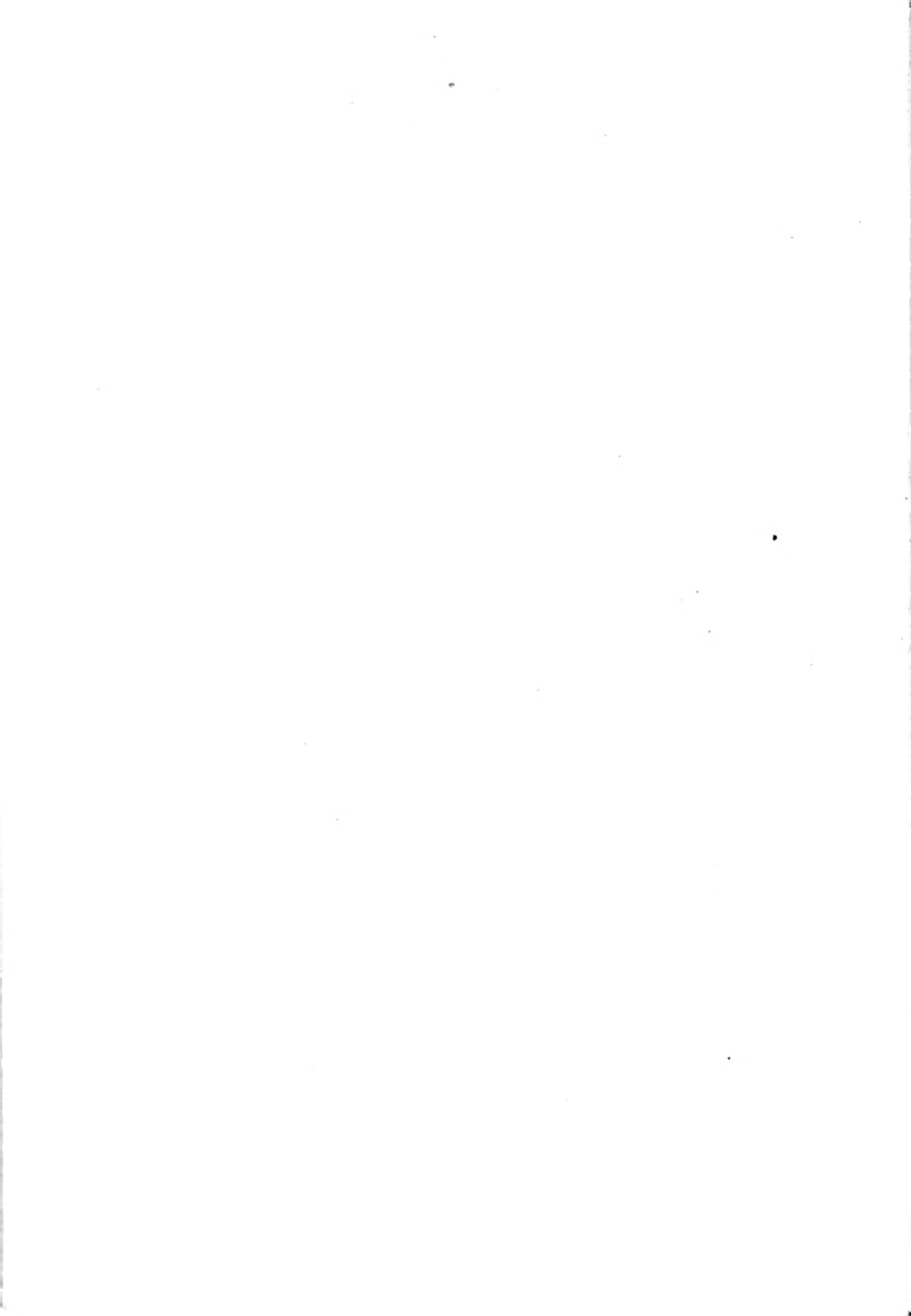
1950

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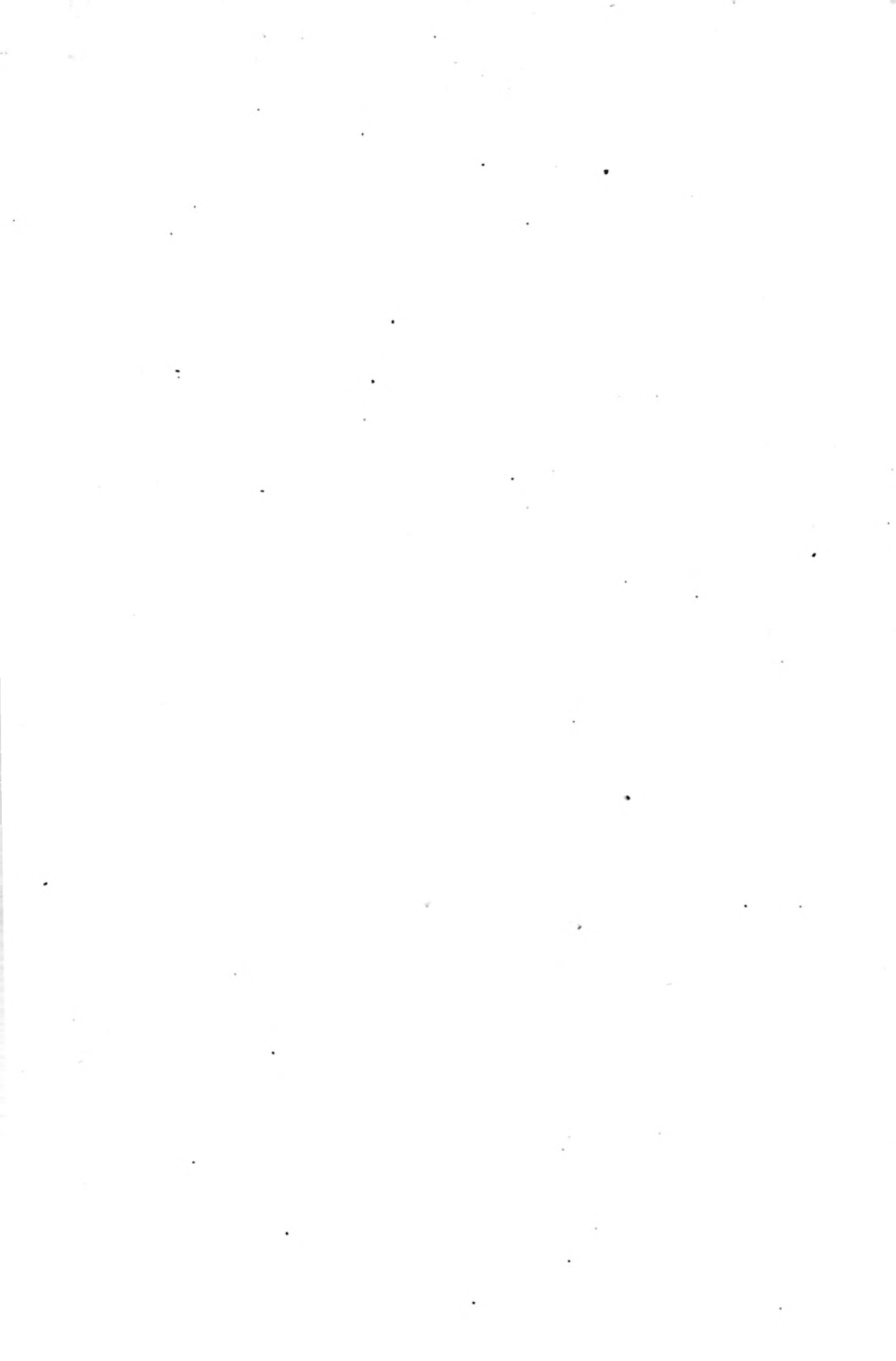
J R Quigley
With My Very Best

J.R.

9/4/50









Photographic copy of original Oil Portrait painted by Raymond P. K. Johnson, N. H. City

B. J. PALMER, D. C., M. C.

Developer of Chiropractic

"B.J. OF DAVENPORT"*

**—philosopher, scientist, artist, builder—the bit of a mortal being
whom Innate Intelligence developed.**

****Oil Portrait by Raymond P. R. Neilson Studios, 131 East 66th Street, New York City***



FIGHT TO CLIMB

By

B. J. PALMER, D.C., Ph.C.

President, the Palmer School of Chiropractic

CHIROPRACTIC FOUNTAIN HEAD
DAVENPORT, IOWA, U. S. A.

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FOREWORD

At the beginning, we anticipate this subject, as presented, will be taken at face value and understood by some, even many of our profession. Many, in our opinion, possess preconceived ideas which need reconstruction.

We record our knowledge, gained through research, of the fundamentals upon which Chiropractic rests as promulgated by our father but never clearly explained by him. By careful reading of his writings, gleanings of these ideas are apparent.

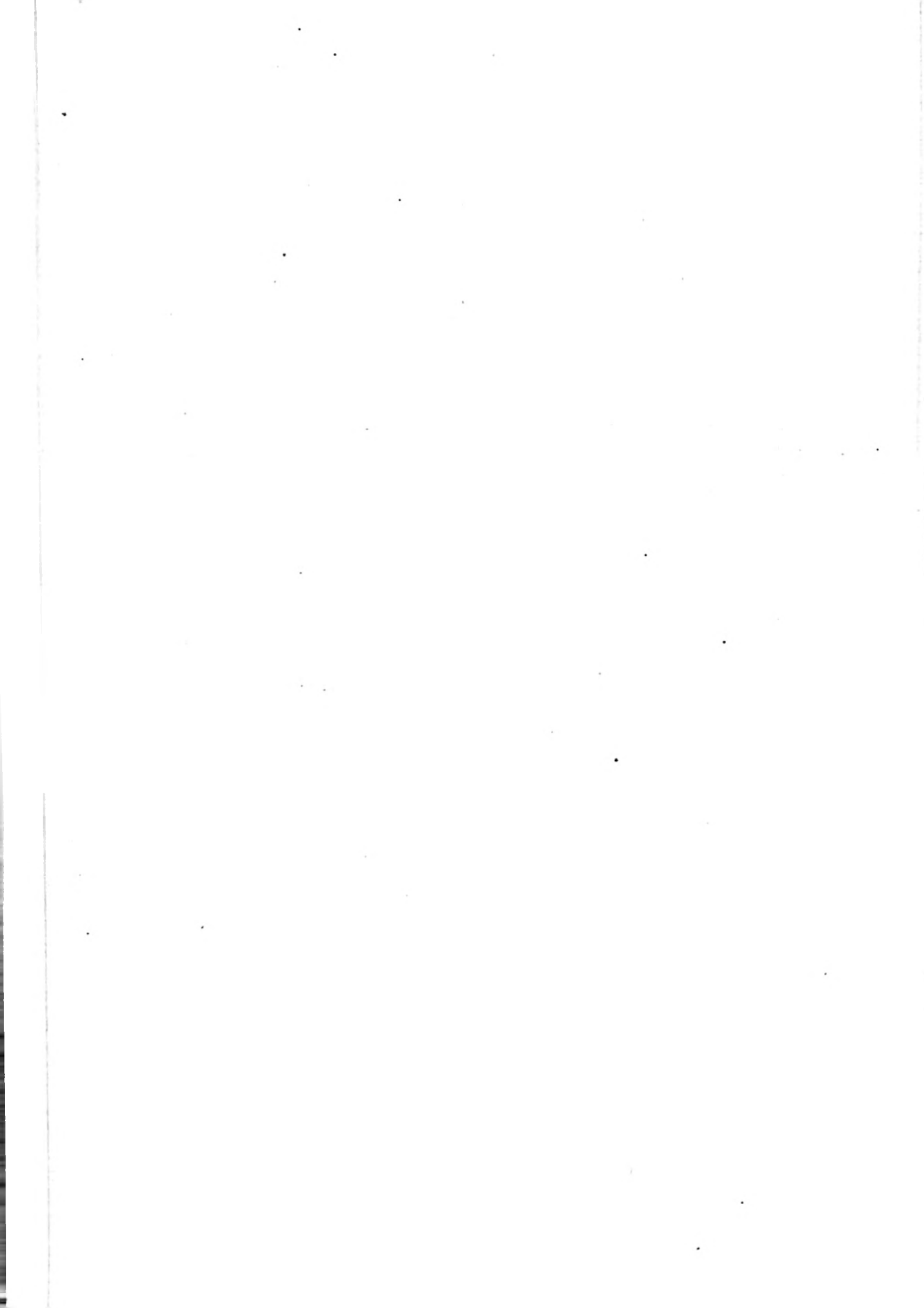
To be consistent with the objective of this book, these are written with WE and US in mind. Ordinarily, "we" and "us" imply and are understood to be TWO different and separate persons. Ordinarily, "I" implies ONE fellow who lives in a material body and runs it. Whenever and wherever "I" is used, we refer to the educated fellow who thinks, speaks and writes for himself alone as one of the two fellows he is. He does so within the limitations of his education. This book, so far as the author is concerned, writes from the duality of personalities — the inseparable, indivisible, Siamese-twin personalities living in one structure — the Innate and Educated individualities.

WE serves several purposes:

1. It eliminates that disgusting and egotistical selfish pronoun "I" which constantly intrudes itself.
2. It permits the author to delineate his concept of the duality of personalities inhabiting one human home.
3. It broadly includes and spreads credit where credit is due, to any, every, and all people who have or are cooperating in building the structures, organizations, institutions, and associations which are an integral part of their lives.

It will be difficult for the reader, as he reads "we", to think "we", because he will constantly interpret it into ordinary channels of thought of TWO different and separate people. To read this book and gain viewpoint of its author, reader must know "we" or HE will fail to gain the fundamental purpose of this book.

B. J. PALMER.



The Story Of MASONRY AS FOUND AROUND THE WORLD

Our experience with Mr. Chen.

On board ship — gingerale.

Mr. Chen wore American clothes, talked some English. Mrs. Chen wore Chinese clothes, bound feet, talked no English. Their daughter more American clothes, talked some English.

We got off at Yokohama. They stayed on to Shanghai, and invited us to visit them when we arrived at Peking.

Upon arrival at Peking, we called Mr. Chen by phone. He came down in car to Hotel de Peking, for tea. He invited us out to dinner — twenty courses — each out of same bowl. We asked what each dish was — some we didn't like and didn't eat. He said same thing about some American dishes.

The Castles, of Hawaiian Islands, were also invited.

We wanted sleeping car from Peking to Shanghai. They sell all berths people will buy; then all go to depot, mad scramble to get on, get in, and grab. We did not want to do this; asked Mr. Chen what to do. He said, "I fix."

Day arrived, and we went to depot. All of Chen family were there. They gave us boxes of Chinese ginger — highest compliment they could pay. Train pulled in, and all others made a mad scramble. Mr. Chen said, "No hurry. Wait. I fix."

After scores fought, and many came away empty-handed, he said, "Now we go." We went in car. Mr. Chen knocked on one door, said something in Chinese. Door was unlocked, and we all went in. While waiting for train to start, he called for conductor, said something in Chinese. After train got started, conductor came for tickets. He said to us, "You know Mr. Chen?" We replied, "Yes." We asked, "What did he say to you?" He said, "Mr. Chen say, 'Take good care. Brother Consistory'." Conductor further said, "I Consistory, too. Mr. Chen head all Consistory China. Maybe bang-bang somewhere. I protect."

Brigands had been holding up trains between these two cities; twice the train was shot at, and conductor told us "Lie down on floor." Later, came back and told us, "All safe now. Get up."

We asked, "Who is Mr. Chen?" Conductor replied, "He big man in China. He hand in card to President China; President say 'Come in.' Mr. Chen, he own railroad. Mr. Chen, he own Hotel de Peking. Mr. Chen big man, China."

No wonder he "fix" sleeping accommodations!

One of our party lost a filling out of tooth. Asked Mr. Chen whom to see. He said, "Go to Methodist Hospital. Tell Dr. So-and-so. He fix." We did. Doctor had just one filling. It fit perfectly.

Masonry IS a "secret" order in China — no buttons, no tell. We tried to work into a Blue Lodge in Peking, thru Mr. Chen. We did not go because we did not care to be subjected to PHYSICAL tests. Ours here are mental.

Most travelers wear Blue Lodge pin. It is more universally recognized. We wore Shrine pin all the time.

While out on the Sahara Desert, we met a native Shriner who belonged to Buffalo, New York.

J. S. Warmbath and his Arctic collection.

He willed his entire collection to us; ivories, clothes he wore; native heads, mounted.

He made three trips with Peary to the North Pole; was with him when he REACHED North Pole.

WARMbath took a COLD bath. Fell into water, hunting polar bear.

He was a 33-degree Mason. Gave all signs. They answered. They went BEYOND, and he couldn't follow.

In Italy, Masonry is a POLITICAL body. Pope is against any "secret" order, including Masonry. Mussolini was against Masonry. He did what any other anti-political body would do.

We here think of Masonry as it is here. Tourists must take things as they are there.

Hieroglyphics as found in the Iyeuseau and Meiyitseau Temples, North of Nikko, Japan. Long before B.C.

The mystical 3 in the Temple of Heaven, Peking, China.

The ruins of Angkor-Wat in the City of Angkor-Thom. Masonic symbols in buildings. 9th Century A.D.

The Pyramid of Gizeh. Mystical symbols of Masonry are found everywhere in its construction.

Pyramids at Kahoka, Missouri. In center, was found a room set for Masonic work — even to chair in the East.

Ruins in Dakota.

Dedicating a new hotel. Indian decorations.

Next day, committee told us there was something on which they would like our opinion. We drove out in the country, about ten miles.

When we arrived, we saw a circular mound approximately fifty-feet high and several hundred feet in diameter. At one corner was what appeared to be a corner-end of a fence, of interlaced, overlapping stones. Was it man-made, or was it a natural formation?

To the east of this mound was a pavement of flat stones several hundred feet wide and several hundred feet long. This pavement came to a sudden stop, from which there was a natural slope downward into a valley. At places, this pavement was covered with earth; other places, it was bare. This looked too artificial to be natural.

We asked, "Have you ever found seashells in this valley?" They replied that many such were found. Theorizing, we suggested: "Go to center of east side of this mound. Dig in. You may find an opening gateway. Continue digging into center. You may find an altar in center of mound which might have been used for sacrifices; or it might have been used for some form of ritualistic service.

They dug, and that's what they found. They dug all around base of mound and found fence continued on four sides, with opening on ONLY east side.

Continuing theorizing, we suggested that in long-distant past boats came down this valley — it then being a river. Pavement was a public market place. Fence enclosed place of worship, or place of meeting of certain tribes for certain secret ritualistic work of some kind.

At time this was a river, ocean waters were receding from this vast inland ocean, following sinking of the Continent of Lamuria, Atlantis, or Mu — which one, we cannot know. Last of these sinkings was Mu, which has been variously estimated at different periods, but approximately 50,000 years ago.

Why place was covered over with earth, was beyond us. You can place your construction on to what use it was put.

We have been in King Solomon's Temple. Later, it was used as a stable for horses.

It is said this was the birthplace of Masonry.

Was it? Is Masonry a very ancient organization, long used for more modern times?

Who knows the answer?

The Story Of
INVITATIONS TO RUN FOR
POTENTATE — MAYOR — GOVERNOR

A conflict existed between two groups, each wanting to elect their candidate for Potentate of Kaaba Shrine. Being unable to agree, they decided to select third party whom both groups would agree to elect.

Fortunately, or unfortunately, they picked on us. Committee from both groups called and offered the position. There could be little doubt the honor would have been ours, had we accepted.

It has been our rule never to accept responsibility unless we could handle it in a manner which would be a credit to the organization as well as ourselves. Knowing we had more irons in the fire than we could handle, we gratefully declined.

Before that, we had been offered Mayorship of Davenport on Democratic ticket. City fathers were dissatisfied with the incumbent; looked around, and decided they needed a successful business man — one who could and would give the city a business administration.

We declined this honor because a business man is always needed in city's affairs; yet a business man is not a good politician. He cannot compromise, give and take, trade votes, play sufficiently fast and loose with the welfare of a city.

Had we run for mayor, we would have endeavored to give the city a liberal conduct of its affairs. It has been our observation that "tight" towns, where churches enforce blue-laws, go dead. This forces liquor, beer, and other so-called "evils" under cover. They are not eradicated; they are more concealed. Slot machines, gambling, and other "evils" are condemned by churches. They continue to exist and thrive more under cover than in the open. People want and will condone "evils," where money is the root of all evil. They might as well be licensed, and city get tax revenue therefrom. That would have been our program, had we run.

On or about same time, we were offered Governorship of Iowa on Republican ticket. Peculiarly, we were asked to run on Democratic ticket for Mayor, and Republican ticket for Governor. We have always been neutral as to party, believing more in man than label he attaches.

We refused to run for Governor because, being a business man, we have believed in meeting issues clean-cut, square, never evading

or beating about bushes on vital issues. Governors don't play the game that way.

To BE elected, he has to promise much to issues on both sides. After elected, regardless of convictions, he is expected to pay debts to party that put him in office. We would have been Governor but once, because we would have made no campaign promises in advance; we would have met issues honestly as we saw them after election. Because of that policy we would have gotten nowhere during our administration; therefore, we would serve but once and both parties would have been dissatisfied and disgruntled.

The Story Of AN OPEN HOUSE

Those who have read and seen pictures in the rear of Volume XXII, know our home is unique — not so much the home as what we call “the porch.”

The porch is 150 feet long, varying from 20 to 25 feet deep, with a 16-foot ceiling. It begins on north side of home, runs due south and then southwest around curve, then due west and down into sunken oriental solarium. It is closed-in, bricked, steam-heated and air-conditioned, and otherwise a part of the home rather than an open porch as one might suppose, from the name.

In north end, is an office. Furniture here is entirely rustic, made by our people in our shops, following designs drawn by us. In it, is our Lincoln collection; American bison head; oriental temple piece, with devil and his St. Peter; and other interesting items.

Going south, comes vestibule from outdoors. Inside vestibule are original leaded-glass double storm doors which, in themselves, would be impossible to get today.

Following thru comes music room, pictured in Vol. XXII, then rustic room with its thirty-eight tons of white oak logs. There are four large upright corner logs, supporting four horizontal cross-logs, all of which supports the self-supporting log ceiling. These trees grew on our properties where now stands The B. J. Palmer Chiropractic Clinic building. Rings indicate they are approximately 350 years old. This weight rests on concrete piers under floor.

When cutting down trees to make way for construction, what to do? Throw them away? Cut them up and burn them? Again, Innate said to make use of that which anybody else would destroy. We decided to make this rustic room. We discussed it with the architect. He said, “You’re crazy.” We talked it over with contractor building porch. He said, “You’re nutty. No person in his right mind would do such.” Our answer was, “Crazy, or nutty, or both, that’s what it’s going to be; and if you two can’t or won’t, we’ll get somebody who will.”

Porch was practically walled in when we decided to do this. The problem was how to get logs in. We finally derricked them up, over, and thru big window in that room.

Furniture in this room is rustic also, made from butt ends of these trees. This room always brings out “ohs” and “ahs.”

In rustic room is a real log-burning fireplace. On mantle is found this epigram: “Ye canna baith be comfortable an gran’.”

On one of logs is a Roycroft carved slab which reads "Be Yourself," and that's the way we want friends to be who visit us.

Then comes living room. A side off-shoot of this room is our dining room.

Stepping down six stairs, we come to oriental solarium. We call it "solarium" because at one time it was original greenhouse of our first "A Little Bit O' Heaven." We call it "oriental" because everything in it, except two electric fans, is from some place in Near East or Far East.

Volume XXII shows pictures of all these rooms, and especially picks some items for detail.

As was true of "Heaven," people heard, friends were invited. They came, they saw, they told others; and soon our home was a mecca for requests to see it. What is a home when everybody wants in? To offset constant requests, we had "Open House" Easter Sunday and Labor Day. To keep down mobs, we charged fifty cents admission, which included continuous trip thru A Little Bit O' Heaven. We have had as many as eight thousand (yes, 8,000) people go thru in one day. We would open at 9:00 a.m. and close at 5:00 p.m. At 5:00 a.m. they were lined up outside, waiting. There was a continuous line until 9:00 p.m.

How did we manage? We left everything on porch as we always had it. We did not move anything out of reach. We had canvas strips placed on floor, indicating a narrow path to follow. Three feet from floor, we had heavy tapes strung thruout route, on both sides, so people had to stay between tapes, on canvas. We had girls, dressed in white, seated at strategic points so they could watch items which might be "accidentally" picked up by people who have itchy and sticky fingers. We had cards printed in fairly good-sized type, describing many more-important and least-understood items.

You ask: what did we do with money thus collected? "Heaven" got its share. Balance went into our vacation fund so we could travel more, collect more, bring home more, and have more to show next time.

As you women can imagine, next day was housecleaning day. Dust was tracked in and settled on everything. But people were pleased, it was educational, therefore it paid dividends in more ways than one.

Finally "Open House" days became a burden. We cut them out; but memory and knowledge of "Open House" lingers on, and there is hardly a day but what somebody "bumps the door bell" and asks, "Can we see your home; we have heard so much about it."

Or, some friend of a friend says: "Your dear friend, Dr. (or Mr. or Mrs.) So-and-So, told us to be sure and call on you, give you their regards, and ask if we can possibly see your home. They have said so much about it." The answer to all is alike: "A home is a home only when inhabitants live in it. It ceases to be a home when it become a museum where everybody has access to it all the time."

The only people who see our home now are OUR friends; and even these are rare occasions and an honor when we do.

General impression everybody gets is that nothing has been designed to any period. It is built to live in. It is comfy, homey, liveable. In its various rooms are five big davenports, comfy overstuffed chairs. We actually DO live here more than in any other part of the home with its twenty-two rooms. We do use dining room daily for our meals, as well as when we entertain guests.

The Story Of THE PENNY BARREL

In Rehabilitation Laboratory of The B. J. Palmer Chiropractic Clinic, anchored with a welded chain, is an all-metal beer barrel. In its top is a small slot. On it is a sign which tells all lookers it is a "penny barrel" designed to accept penny donations eventually to be used to help our B. J. Palmer Chiropractic Hospital. Barrel has been here about five years (1950).

While it asks for pennies, nobody will be hanged, quartered, boiled in oil, asphyxiated, or poisoned if he accidentally slips in nickels, dimes, quarters, halves, or dollar bills.

On our trips, we NEVER spend a penny. With sales tax, there are almost always pennies in change. They go in a special pants pocket, and when home they go into penny barrel. Pennies that accumulate in A LITTLE BIT O' HEAVEN also go here.

During 1949 Lyceum, one evening before program began, we began kidding audience. We asked them, "Want to do us a favor?" "All who do, say 'I.'" Of course, there was a democratic shouting. "If you do, everybody stand up." All did. "Now, reach left hand into your pocket." All did. "Everybody drag out all your loose change." They did. "Everybody who has ONE penny raise his hand; TWO pennies; THREE pennies; FOUR pennies; FIVE pennies."

We then brot into view an India beggar-bowl — from India. It is made of heavy brass, has a heavy handle. It has a large open bowl at top, which narrows down to a small throat, which then opens into a larger bowl below. It would hold about fifteen gallons of water if filled with water. This is a genuine beggar bowl carried by beggars in India.

We told this to that vast audience of more than five thousand people. We told them that after evening program we would have this bowl at exit gates, and they could drop in those extra pennies as they passed out. We told them, "By no means, please, we beg of you, don't under any circumstances drop nickels, dimes, quarters, or halves by mistake — just pennies." Of course, we laughed at that, for we meant to imply that was what we wanted.

After program, that bowl was so full of coins that one man could hardly carry it. Next morning, we had pleasure of putting these in penny barrel. At this writing, we think barrel is about half full.

How much will it actually hold in dollars? We haven't any idea. It will be interesting to know — when it IS full.

The Story Of SAN QUENTIN

Years ago, it was a pleasure to speak before California Chiropractors Association, in convention assembled. We spoke at Stanford.

At that time, one Chiropractor had, as a patient, the spastic son of Commissioner of Penal Institutions of California. We were asked for consultation with Chiropractor and father, which was granted. Our usual \$100 fee was waived, because we wanted a favor from the father. We wanted to visit the famous San Quentin Penitentiary, which is to west coast what Joliet is to midwest, what Sing Sing is to eastern coast.

Father asked if there was "any favor he could do for us." We replied we would like to visit San Quentin. We would like to be driven from Stanford, thru streets, in prison van that takes convicted men to pen. We wanted to go exactly as prisoners go, with guards and guns. We wanted to have extreme pleasure, for once in our lives, of driving like mad thru all red lights entire route. This was granted, and was done.

All along route, siren shrieked, people gaped and felt sorry for one lone prisoner they saw "going to San Quentin."

We took ferry across river. People looked in. "What a pity — he doesn't look like a criminal." Inwardly, we were laughing. If they but knew!

We arrived at San Quentin; were passed thru gates. Warden met us and had us shown thru shops. We saw death cells with six men waiting. We saw ropes hanging, being stretched, waiting their turn. We were shown how hang-man's noose was tied. We walked up those fatal thirteen final steps.

We were told, as we went thru, to stay at least ten feet from any prisoner, and to talk to no one — not even to answer questions, if asked. Purpose of staying ten feet away is to prevent passing anything to anybody.

Finally noon came. We had lunch in the warden's and his executives' private dining room. Only waiter who served us was Tom Mooney, the convicted San Francisco Labor Day parade bomber. We asked warden if he would introduce us. He did! We then told Mooney he had "one friend on outside who was rooting for his delivery," for which he thanked us.

That afternoon we were released, back into outer world, once more a free man. It was a tremendously interesting day, seen under most favorable auspices.

The Story Of "PETE" MacARTHUR

Thirty-one years ago (1918), Radio Station WOC came into existence. It was a small plaything, but we thot then, as has since proven true, we saw a definite place for talking to people everywhere.

One day, Harry Lauder, Scotch comedian, played Davenport. He came in President Theodore Roosevelt's private Pullman, which was sidetracked at Rock Island Lines depot. We met Harry (Sir Harry, later) and were invited to have dinner with him in his car after evening performance. At that party were Harry, Mrs. Lauder, "Pete" MacArthur and his wife, and ourselves. During course of evening, we talked about radio, because it was then an all-important development to us and a strange subject for Harry and Pete. We didn't know much about it, so discussion was interesting for all.

During the talk, we laughingly suggested to Pete that we were seeking a Program Manager — and would he like the job. Jokingly, not taking us seriously, he said he would. "When do you want to come?" was our next question. "Tomorrow," said Pete. Both of us started out, never thinking either could be true. We took him at his word. The next morning, Pete was on the job at 8:00 o'clock.

Harry Lauder was a Scotchman and a heavy drinker. He was wine and dined everywhere by everybody of importance. Often, he was so badly "in his cups" he could not put on his show. Here's where Pete came in. He was Harry's understudy for twenty years, often taking Harry's place in the show. Public hardly knew difference between one and other, for Pete could and did sing Harry's Scotch songs with same fidelity as Harry.

Pete started in and built our radio station for twenty years, with ability supreme. Oftentimes he dubbed in as singer, program manager, and general all-around factotum — for in those days crew that ran station was small, and any one person did a little and a lot of everything necessary.

Later, when we annexed Radio Station WHO, Des Moines (50,000-watt clear channel station), Pete was given complete charge of building WHO Barn Dance show. By this time, WHO had grown into a larger organization with each person carrying his small-large part.

Pete's first wife was a tartar, if there ever was one. She was a hellion. Some years later, Pete got a divorce. We could never understand why he continued to live with her. When we asked

him, his answer was characteristic: "I thot a divorce might cast a stigma on WHO, and I wouldn't do that for the world."

We often tell the joke on Pete that we saw him in the office of Dr. A. B. Hender (Dean of The PSC), and he was using tweezers and taking slivers out of Pete's tongue. When asked what was going on, Dr. Hender said: "Somebody dropped a bottle of Scotch."

After serving faithfully with us twenty years, giving us more than anything and everything he had, helping build a successful radio station and making it one of the five outstanding stations of America, Pete took sick. He got down with rheumatic fever which later developed into rheumatoid arthritis. Eventually, Pete's entire body was one solid bone from head to toes, even to his jaw — all bones completely ossified and ankylosed.

Pete was one of a Davenport quartet that always sang at noon Kiwanis meetings. So freely did Pete give of Scotch singing talent and his ability to direct shows, that Kiwanis, at its expense, sent Pete to Florida for a winter vacation. He kept getting worse. He never returned.

Before leaving Davenport, Pete met "Miss Hupp" who was clerking in a Davenport department store. She married him knowing his helpless condition. She nursed, cared for, and otherwise loved this man as no other instance we can think of in history. She worshipped Pete. Altho bedfast fourteen years, she never left him, night or day. She idolized Pete.

They rented a home in Palm Beach, Florida. Often we went there for our vacation. No matter how low we were in spirits, and no matter how low anybody in Palm Beach was, all went to Pete to be cheered up. Pete once said, "I have everything to live for. Look at all the friends I have." Pete was always cheerful, never seemed to suffer, never groaned or grunted or gave utterance of suffering and pain we knew he was always going thru. He eventually became blind in both eyes. We who were up and around, able to move about, thot we had reasons for giving vent to sufferings; but Pete, never. He was the greatest inspiration with whom we have ever had association.

As to "Hup," she was one in ten million. When we would go deep-sea fishing, or some place in our car for a day or two, we insisted she tear herself away from Pete and go with us. She would refuse because "there was nobody to take care of Pete." Pete would insist she go, and occasionally she would.

One day, at Stuart, Florida, we went fishing. We took Pete in his wheelchair, thru streets to wharf, put him on board in his chair,

lashed it to deck, and from there he watched us fish. He enjoyed that day more than we did. He would laugh in sheer delight.

Obviously, Pete had no income. Hup had no income except what they took in from boarders and roomers at their home in Palm Beach. Sometimes season was short, or visitors few, so sledding was hard. When Pete left us, we kept him on the payroll. This continued fourteen years, until he passed away in fall of 1948. We paid him his regular monthly salary, as tho he were still helping with the stations. And why shouldn't we? He had given us twenty best years of his life. Regardless of whether day was long or short, hard or easy, Pete always was ready to go anywhere, do anything, for anybody — with never a thot of gain to himself. Such loyalty was entitled to every consideration on our part. We kept him on the group insurance payroll, and when he passed away, Hup received \$5,000 insurance.

Hup knew she was marrying a helpless cripple, but this did not deter her for one minute. She knew it would be what all of us considered a life of sacrifice. Hup never considered it such. To her, it was a labor of love such as happens once in a million years to two out of a million.

Pete is no longer in the flesh, but kind memories of Pete and his most wonderful companion, Hup, will linger with us as long as we live.

(We mention our part in the financial help we gave Pete and Hup, not because we ask for praise, but because it shows how much we love them both and desired to do our part to help thru those 14 years. If they could "sacrifice" as they did, we, too, could do our part, small as it was.)

The Story Of MAJOR BOWES

Major Bowes was a CB — Chiropractic Booster. His business manager for Amateur Hour was a PSC graduate, who suggested one time that he would be glad to arrange for us to meet the Major. On our next trip in, it was done.

Meeting was arranged for cocktail hour at his apartment over Capitol Theatre, New York City. Major practically owned this Broadway showplace. His New York apartment was entire third floor over theatre. We went up in his private elevator.

Entire front room was large art gallery. At one end was a large painting of Margaret Illington (Mrs. Bowes). We recall when Mrs. Bowes was sick, in Florida. We received a wire from Major asking us to fly to Florida to see her, professionally. We had bags packed and were ready to go when another wire told us she had just passed away.

At this meeting Major and we were alone. We chatted a bit and altho a busy man, answering phones and what-have-you, he was most gracious.

On another trip to New York, we went to an Amateur Hour show in another theatre. After show, he invited a few friends upstairs over this theatre for an evening supper. This room was crowded with paintings. Major was a great lover of paintings. About twenty people were at this gathering, none of whom knew each other. We stood around with nothing to do but admire paintings. Major came in late, went to a desk in one corner, to look over wires received. He did not speak to his guests. We wandered around and around. Finally, we realized hour was late, we excused ourselves from somebody or other, and left for our hotel. We tried to say goodnight to our host, but he was busy tending to business affairs.

Major was a most wonderful person. As he sounded on air, that's exactly as he was. We have an autographed photo and some interesting correspondence from him, framed, on our office walls.

The Story Of PLUS AND MINUS

There is only ONE dis-ease — the minus. There is ONE normal-abnormal adaptation to this minus — the plus.

There are two conditions matter finds itself in — plus and minus, above and below par, too much action and too little action, hypo and hyper, too rapid motion per minute and too little action of matter per minute.

Between these there is a normal and natural rate of speed of action per unit of time. What par is, no educated man knows, even within himself, let alone on outside of another person. Any attempt to guess where par level is, is arbitrary and empiric. Any attempt to guess what treatment to give, regardless of means or methods, to bring above-par down to par or to bring below-par up to par, is arbitrary and empiric. That makes medicine uncertain and proves that one man's meat is another's poison; what works one way, in one, works in opposite ways in another. That is why there is no specific in ANY treatment, because no two bodies being treated are alike in chemistry or physics. There IS ONE source of normality — Innate Intelligence residing IN body that is sick. That source KNOWS positively, exactly, and accurately, and THAT source never tells any man, whether "ignorant" or "educated," physician or layman, where that health line is.

Whatever and wherever that natural and normal is, it is never MORE than that. If normal, it cannot be MORE normal or MOST normal. It can be BELOW normal, LESS than normal.

Effects, symptoms, and pathologies SEEM to manifest plus indications. Fever, diarrhoea, dropsy, tumors, adhesions, hyperthyroidism, headaches, pains, diabetes, bradycardia, contracted muscles, all "itis" conditions, etc., SEEM to indicate *a plus* of normal function. They are NOT plus. They are normal and intelligent *adaptive* conditions to the ONLY abnormal function there is — minus function.

Deafness is minus hearing; blindness, minus sight; paralysis, minus motion; contracted muscles, minus relaxation; prolapsis, minus contraction; constipation, minus peristalsis; costiveness, minus secretion; indigestion, minus digestion; insanity, minus sanity; death, minus life; dis-ease, minus ease; headache, minus sense of feeling.

Fever is an adaptation of Innate to burn poisons produced by paralyzed minus of elimination. Dropsy is a damming back of urinary excretions because of minus actions of kidneys to eliminate.

Exostosis is an Innate adaptation to an abnormal pathology in bones. Tumor is an Innate adaptation to a reduced normal use of normal expansion of normal tissue cells. Hyperthyroidism is an excess secretion in thyroid brot about by a lack of action of those glands to eliminate excretions. Headaches are a normal epiphreal mental interpretation of an abnormal reduced physical action of function at periphery of efferent nerves.

Studying symptoms and pathologies, physician sees plus. He treats plus. He aims to REDUCE fever, tap dropsy, cut away exostosis, break down adhesions, check diarrhoea, cut out tumors, remove thyroids, give pain-killing drugs, etc. Plus is his objective. Minus is subjective. Plus is adaptative. Minus is THE dis-ease.

Because seeming plus function is obvious, physician treats *it* and fails to accomplish normality. Because minus function is submerged, physician does not know its existence, therefore does not seek that knowledge, hence fails to get sick people well.

The Chiropractor knows a vertebral subluxation occludes an opening, produces pressure, and interferes with normal quantity efferent flow of energy between brain and body, REDUCING normal quantity, SLOWING natural and normal rate of speed of action of tissue cell structure, producing BELOW par product or by-product. Chiropractor, knowing this, seeks to locate and gain knowledge of BELOW PAR DIS-EASE. Innate adaptative ABOVE par does not interest him because that is induced by Innate trying to help establish par level.

Let us cite two or three examples which could be multiplied endlessly:

1. Because of vertebral subluxation, it cuts DOWN normal quality of mental impulse supply TO kidneys. Because of this, kidneys become paralyzed. Being paralyzed, they cannot sap or suck towards them normal quantity of fluid wastes from body. Because of this, they are dammed back into body. Excess fluids dump themselves into whatever weak spot they find, be it abdomen, head, chest, heart, lungs, etc. Physician sees *excess* fluids. That is what he treats. Chiropractor goes back to paralyzed kidneys, back to *lack* of normal supply of energy to kidneys, back to vertebral subluxation which interferes with normal efferent energy supply flow, back to adjustment of vertebral subluxation. When that is adjusted, normal supply of energy flows *to* kidneys; they begin to come to par of action per unit of time; they sap excess fluids from body; dammed back fluids are drained off by kidneys; and individual begins TO GET WELL of dropsy.

2. Because of vertebral subluxation, it cuts DOWN normal quan-

tity of mental impulse supply to vertebrae. Because of this necrosis, caries, or osteomalacia exists. Contiguous relationship between two bones becomes abnormal. They collapse. Innate goes to nearest ossific cell centers above and below, expands cells, takes them down from above, takes them up from below, builds welding bridge across two or more bones, and we soon have an ex-os-totic ankylosis. Physician sees ankylosis; cuts in and cuts *it* away. Chiropractor goes back to vertebral subluxation, adjusts, re-establishes normal communication and function between Innate in brain and function between bones. Innate fills open pathological gaps. Then there is no necessity for ankylosis; Innate denudes exostosis; takes it away; and patient GETS WELL of caries, necrosis, osteomalacia, tuberculosis, or what-have-you. Physician sees plus. Chiropractor finds minus.

3. Because of vertebral subluxation, it REDUCES normal quantity of mental impulse supply to muscles which support certain chest and abdominal organs or structures; muscles become permanently paralyzed, which is a prolapsis of muscular structure; viscera or abdominal walls cannot support themselves in normal position. In abdominal walls it is hernia or rupture. Innate steps in and builds an adaptative supporting *adhesion* tissue to prevent such getting worse. Physician *sees* adhesions, cuts in and cuts away *adhesions*. Regretably, some Chiropractors (?) have same idea, except instead of cutting them away they manually dig into guts and tear them loose. Innate, being an engineer, was adapting a necessary support. Chiropractor goes back to prolapsed muscles, knows why they prolapsed, trails back to reduced supply of mental impulse muscular contraction power, adjusts subluxation, restores this to normal quantity, after which muscles contract normally. There is no longer necessity for adhesions. Innate takes them away as she did exostosis. Adhesions are to soft tissues what exostosis is to hard structures.

Physician does not know about or recognize existence, presence, or ability of an intelligent Innate at work in a living human body. He does not know that Innate builds an adaptative action to a minus of function. The minus, being obscure, is ignored. Innate, being "unknown," is denied.

Chiropractor, knowing about and recognizing existence, presence, and ability of intelligent Innate at work in a living human body, studies abnormal functional conditions in that light, and leaves seeming plus function alone; ignores it; but seeks information about minus and how to bring minus to normal, realizing that from then on Innate will do what is necessary in its own normal manner and, given time, individual WILL GET WELL.

There can be no minus without its plus. The lowest spot in United States is Death Valley and right alongside is the highest — Mt. Whitney.

The Story Of PORT PERRY

In the summer of 1949, we received an invitation to be the honored guest and guest speaker at Memorial Picnic at Palmer Memorial Park, Port Perry, Ontario, the birthplace of D. D. Palmer.

We gladly accepted, because we had never been to his birthplace and we wanted to encourage the movement started by the WOMAN'S ACADEMY OF CHIROPRACTIC of Ontario. The objective is to build a Chiropractic hospital.

We flew to Toronto from Chicago. We were met by a committee of three men and three women, all Chiropractors.

We had had correspondence with school officials, students and officers of student body of Canadian Memorial Chiropractic College, asking us to address their student body. We have made it a rule never to endorse or support that which we cannot honestly endorse or support. This college had been teaching physiotherapy. To speak to them would give them the opportunity to say our presence WAS in support of and endorsement of that kind of instruction. Willing to help students, we suggested an alternative — they get a neutral hall outside of college, and we would be glad to address them. Upon arrival at airport, we were told they had secured a hall in a church that evening. About two hundred were present. Outside of one minor incident, it was a pleasant affair.

Port Perry, Ontario, is sixty-five miles east and north of Toronto. It is on Lake Scugog. We drove out in morning and were met by Reeve (Mayor) Hayes and Reeve Letcher (former Mayor).

Accompanied by committee and "their honors," we visited the home said to be place where D.D. was born. Family now living there had been there only two years and knew nothing about its early history. We asked many questions of various people, but could gather little authentic history. Father was born thereabouts in 1845 — 104 years previous. Father and their entire family moved away when he was about sixteen years of age.

We visited PALMER MEMORIAL PARK where the NCA had erected a monument said to have cost \$15,000. If it did, somebody got badly gyped; or somebody made much side-money in the transaction.

This day was OUR birthday — September 10th. Just happened that way, because committee did not know it until told.

About 4:00 p.m., caravan of buses, cars, arrived from Toronto. They brot Salvation Army band of twenty pieces. Upon arriving

at edge of town, they disembarked and marched thru street playing ONWARD CHRISTIAN SOLDIERS.

Platform had been erected, P.A. system installed, and Women of the Dominion had arranged eats.

Afternoon program opened with band playing GOD SAVE THE KING, and, as courtesy to the speaker, THE STAR SPANGLED BANNER. Flag staff by monument had Canadian flag at top, U. S. flag below. Upon introduction of speaker, band played HAPPY BIRTHDAY. We were presented a beautifully-carved lamp, with base carved to resemble human torso, with backbone and pelvis in bas-relief. On it is engraved:

DR. B. J. PALMER
HAPPY BIRTHDAY, SEPT. 10, 1949
COMMEMORATING YOUR FATHER'S BIRTHPLACE
PORT PERRY
PRESENTED BY
WOMEN'S ACADEMY OF CHIROPRACTIC
CANADA

It was a day we shall long remember because of seeing father's birthplace as well as kindness and thoughtfulness all extended us while there.

The Story Of THOMAS H. STOREY

Thomas H. Storey was one of father's earliest graduates. He had been a professional man — what line, we do not now remember.

He was about 5' 6", weighed about 150 pounds, neat dresser, tailored suits, gray hair, short mustache, very distinguished in appearance — one of those types that stand out and make one turn to look twice and wonder who he is and what his business. He walked snappily, with shoulders thrown back. His eyes were piercing. He had a happy and contented smile as tho all the world owed him a living and he collected it in its richness.

He learned what little father could teach him, graduated, and returned to Duluth, Minnesota, to practice. He opened an office in a prominent downtown building. He built an extensive practice. He was well liked, belonged to many prominent clubs. He was a thirty-second degree Mason, a Shriner.

He was very methodical in manner, systematic in habits, as regular as clock work. His offices were neat as a pin. His clientele was the best. His income was affluent. Owned his home, which was in a fine residential district. Patients had confidence in him, for he radiated health.

Every day — regular as could be — he left home at 8:30 a.m. Walked to his office, arriving at 9:00 o'clock. His office assistant dressed in white and was courtesy personified. In fact, she was as much an asset to business as was he. Dr. Storey took no liberties. His professional attitude was strictly professional. At 4:30 p.m., he left office, walked home, and spent every evening with his family, consisting of wife, daughter, and son.

At time of his disappearance, he was fifty-five years of age.

One morning, walking to his office, possibly absent-minded, he crossed street and a car struck him. He was thrown to ground, cut here and there, stunned. He came to quickly — AND FROM THAT MOMENT ON THE EDUCATED THOMAS H. STOREY CEASED TO EXIST. Entire personality changed. He got up, walked to office, secured little black satchel, walked to bank and drew more than \$9,000; walked out of bank, and disappeared off the face of the earth. One of the mysteries which none could explain was how THOMAS H. STOREY blanked out, yet successfully secured deposits of THOMAS H. STOREY at bank. How they came to give money to him — another man — has never been explained.

From here on, we piece the story together as we secured it from wife, daughter, son, and others who told us tales of what occurred.

When Thomas H. Storey did not return home that night, the family was surprised. They thot maybe he had been called out of city on a case — which occasionally occurred — altho he always phoned when such was the case.

They waited three days before reporting to police. Every effort was made to trace his activities — nothing was found. For a month he was kept on the police blotter a "missing person." Finally, search was given up in Duluth.

At end of third day, Mrs. Storey wrote my father explaining strange disappearance. All kinds of theories were advanced. He was a dapper fellow. Did he run away with some other woman? Was he kidnapped? Was he induced to draw out money — and robbed? Was he in hiding for some reason best known to himself? For these and more questions, no answer could be found.

Mrs. Storey asked my father to do what he could to help locate her husband. Father wrote letters to Chiropractors over the country — who were few and far between in those days. Police sent pictorial printed descriptions over the country — north, south, east, west. For several months, no trace was found.

Finally, Chief of Police of Minneapolis wrote, saying he had spotted a man of that description working in a restaurant as a dishwasher. He was dirty, unkempt, shoes run down, overalls, unshaven. When asked his name, he replied, "TOM JOHNSON." He denied knowing THOMAS H. STOREY, said he had never been in Duluth, did not live there, had no family, was not a professional man, knew nothing about doctoring; he was a tramp.

TOM JOHNSON, hounded by police, decided to move on. We next heard of him in Fargo, North Dakota. He was working as a grease monkey in railroad roundhouse. He lived in cheap boarding house with bums like himself. Again police reported they thot this was our man, they were not certain. He denied having been THOMAS H. STOREY. Again, he was TOM JOHNSON.

He moved on to Missoula, Montana, where he was recognized by a former patient who spoke to him, calling him THOMAS H. STOREY. He claimed emphatically he was TOM JOHNSON and was working as a ranch hand on a ranch out in the country.

We next picked up his trail at Seattle, Washington, where he worked as a dock hand, doing hardest manual labor on dock, loading and unloading boats. Police "thot" he answered description, but were not certain. He was picked up for questioning but, in

a calm, deliberate, honest, and forthright manner, denied everything they asked. They let him go, convinced he was not THOMAS H. STOREY.

He was next located in Los Angeles, as a clerk in a grocery store. One of the customers was also a graduate of father's, in same class as THOMAS H. STOREY and he was certain this WAS THOMAS H. STOREY. Without saying anything to THOMAS H. STOREY, he wired father he had located the missing man. Father took next train to Los Angeles, recognized him AS THE MISSING MAN. He went with him to his boarding house, talked with him. STOREY denied having met father or having known him. He denied knowing anything about Chiropractic or ever having been for several months in Davenport, Iowa.

Gaining his confidence, father convinced him he was sick and needed an adjustment. He gave him one atlas adjustment. TOM JOHNSON — stunned — got up off improvised table. Reaching up and rubbing right side of head, he said: "The right side of my head is here now. It has been gone for a long time." Surprised, he asked where he was, what he was doing in this boarding house. He thot he "would walk back to his home up on the hill and have dinner with his family." When told he was in Los Angeles, that he had traveled from Duluth, had stopped at various places and taken various jobs, he could not believe it true. Once more he was THOMAS H. STOREY.

It took several days for him to re-orientate himself and gather his wits, before going back to his family and practice.

The value of this story comes in the fact that TOM JOHNSON registered everywhere as such, paid his bills, worked in various vocations, talked and acted rationally to his friends, was in every detail TOM JOHNSON — another personality. When found, he had spent only \$700 of the \$9,000 drawn from bank; protected it from being stolen. In every particular, he WAS another personality.

Here was a case of dual personality. How did he lose THOMAS H. STOREY, and how did he gain TOM JOHNSON? Where did one go and other come from? How did he change from dapper, well-dressed gentleman, to a laborer, with other changes that went with it?

This experience convinced father that TWO PEOPLE LIVED IN THAT BODY: one was educated THOMAS H. STOREY, other was Innate TOM JOHNSON. It was Innate who directed movements, protected him, secured jobs, dressed, bathed, saved money, paid boarding house bills, bought railroad tickets, took him from city to city.

Thinking Chiropractic, father realized that the educated fellow could be *and was* blanked out by the accident, producing a vertebral subluxation which blocked off flow between Educated and Innate brains. It was then Innate TOM JOHNSON stepped in and controlled ALL the body, waking and asleep, day and night, here and there, from one job to another.

It was this case which started father thinking seriously about the positive personality of Innate Intelligence living in all of us.

Many people call this "amnesia." What IS amnesia, but a blanking out of one personality, with other taking charge? Various cases of this kind have been reported who have had the original educated fellow restored by adjustments.

(Written later)

One night at a P.S.C. banquet, having nothing in particular to say, the idea suddenly flashed to tell this group "The Story of Thomas H. Storey." It was first time we had ever told it. We groped about in our memory for detail. Above is the story as we remembered it.

What now follows is the ACCURATE story. We dug back into our files and found printed record as printed in a publication. We leave original story told at banquet as we told it, so our readers can compare it with original printed record at or about time this happened — more for reason of showing how fickle and uncertain memory is as years intervene.

Dr. Thomas Storey, 527 East Sixth Street, Duluth, Minn., disappeared two weeks ago last night, very mysteriously, leaving word that he was "called away suddenly", and every effort to locate him since has utterly failed. He took with him more than \$1,000 cash which he drew from the American Exchange Bank that day. No reason is known for his leaving, and his family is at a loss to account for his absence.

Last seen of the missing man was on Thursday evening, May 15th, when his son, Thomas J. Storey, called at his office. His father was apparently in the best of health and spirits, and said nothing about going away, altho later developments show he had been planning that day to go somewhere.

Friday was "Ladies' Day" when women patients called at the office. The doctor's wife, who had been in the habit of assisting him on these occasions, went to the office expecting to find him there, thinking she would then learn why her husband had not been at home the night before. His absence did not alarm her, as his practice had at times kept him from home.

On the table in his office she found an envelope addressed to her in the doctor's handwriting, and containing a brief note scribbled on a scrap of paper, which read:

"Dear Sarah: I have been called away suddenly.
Get along as best you can until I return.

Thomas."

Beside the envelope was the bunch of keys usually carried by her husband. She still expected he had been called to some case in the remote part of the city, and that he would come in during the morning; but when he failed to appear, she finally became alarmed and sent for her son, Thomas J. Storey.

They then decided that the affair should be kept quiet and what inquiries were made were among intimate friends who were asked to say nothing about it.

It was not until May 25th that any news was received, and then a letter came from Seattle, Washington, signed "W. H. Watson." It was written with lead pencil on a note head of Hotel Ranier Grand of that city, dated May 19th.

The writer said that Dr. Storey was in good hands under the care of brother Masons. He had been found on the train Friday (day following the day he was supposed to have left Duluth) acting strangely. He had a through ticket to Seattle. He was unable to give an account of himself, but his identity was learned from papers he carried. He had been placed in a good hospital and the attending doctors said he had a case of brain fever. He talked continually of Dr. Murray and Ida and Ida's baby, and seemed to believe that he was taking the baby where they could not get it. He called for Ida very often, and at times said the office must be closed up and the heads and cases be placed in the high school. Watson said Storey was doing well, and would probably be better in a day or two, and promised to write again in that time.

Manager Dunbar, of the Hotel Rainer Grand, was wired at once and replied that he knew nothing of Dr. Storey, that he had not been there, nor could he be located at any of the hospitals or hotels. He added that W. H. Watson left on May 20th.

Duluth police were then applied to, and in response to a telegram from Chief Troyer, Chief Sullivan of Seattle wired that he could not locate either Storey or Watson in that city.

It was learned that Dr. Storey asked his friend Charles Koogler for the loan of a grip, saying he expected to be called away soon, and needed it. Mr. Koogler brought his suit case to the doctor's office on the day he disappeared, and the doctor evidently took it with him.

As before stated, no reason is known for the disappearance of the doctor. He had a beautiful home on East Sixth Street and a very large practice. He had never shown any indication of mental disorder, altho he had been working very hard for five or six years, as his practice grew.

The letter signed "Watson" had every indication of having been written by someone acquainted with Dr. Storey, or at least with some of the missing man's affairs. The "Ida" referred to was Dr. Storey's daughter who resides in the east end. A baby was born to Mr. and Mrs. Arbouin about two months ago, which lived but a week.

The missing man is about fifty-eight years of age, has lived in Duluth and practiced the healing art for several years, and has a family, the youngest of whom is fifteen years of age. He is a thirty-second degree Mason and a Mystic Shriner.

"I do not know what to think," said Thomas J. Storey last night. "The more I learn of the case, the more mystified I am. We have done everything that we can think of to locate my father, but without learning anything. Family relations were always pleasant; father had been fixing up his home, his business was prosperous, and his health was apparently excellent. He took great pride in his garden and it is one of the finest in the city. No, I cannot even form a theory, and we are simply waiting in hopes that something will turn up."

Most interesting and instructive part of this strange story is yet to be told by the writer:

Dr. Storey is a graduate of The Palmer School of Chiropractic. Among other efforts to locate the missing man, they wrote to us, thinking it possible that he had taken a notion to come here. About June 7th, we received a short letter from Dr. Storey, written at San Francisco, stating he was going to Los Angeles and he wanted some Chiropractic literature. This letter was immediately forwarded to his family. From that time, any knowledge of Dr. Storey was promptly passed between the family and us. Whenever Dr. Storey was heard from, he was always going to some other place. He was like the California flea — hard to locate.

About June 14th, we made up our mind to go to the coast and locate him. He seemed to have a traveling mania — was liable to be heard from anywhere between Spokane, Washington, and San Diego, California.

We arrived in Pasadena June 28th. On June 30th, we made a

trip to Ocean Side. Dr. Storey was on that train going to San Diego, but was not seen by us.

The house where Dr. Storey had been rooming was located. Landlady said she thot he acted strangely at times; she took him to be a sporting man and did not see much of him as he roomed there but took his meals elsewhere.

We kept in touch with the Storey family in Duluth. They heard from him occasionally, but he was always on the go, so that by the time we received notice from Duluth, it gave him time to make another move.

About July 15th, we were at Los Angeles; had just entered a street car for Pasadena. Dr. Storey, accompanied by a boy about fifteen years old entered the car and was immediately recognized by us, altho he did not look like the former Dr. Story. His face was bloated; one eye blackened; his clothing was soiled. He was a very different looking man than the Dr. Storey of a year ago. We took him in charge. Arriving in Pasadena, we wired his wife: "We have him; a little off."

He was in a pitiable condition. He knew he was not mentally right, so had the boy care for him. We showed him the picture of the class in which he graduated; he did not recognize his own likeness or that of any member of his class. He would say: "I ought to know them, but I don't."

Frequently, for hours at a time he did not know anything. On one occasion he sat on a rock on Santa Barbara beach when the tide was out, and remained there until incoming tide was up to his waist. Bathers observed his condition and took him ashore. He said that on such occasions, when he came to himself, Masons were caring for him.

After satisfying ourselves that Dr. Storey was mentally deranged, and knowing the cause of his condition was a subluxation at cervical, we spoke of it and he replied, "I know that is the cause and I have been trying to find some one to fix it."

We took him in our adjusting room, laid him on the table, and adjusted the displaced cervical which had been pressing on the nerves that went to the right side of his head. In one-half minute, he raised his hand to his head and said: "This side of my head has been gone for a long time. It is here now — I can think." He arose, with his former intellect.

After dinner, we asked him how much money he had. He said he did not know. We asked where he kept his money. He replied,

"I used to keep it in my inside vest pocket." Upon looking, he found \$460. He then inquired how much he had when he left home, and we told him he drew \$1,100 out of the bank. As fast as we thot best, we informed him how matters were at home.

We tried to keep him and the boy overnight, but we had been imprudent in showing the boy a case of human bones; therefore, we could not persuade him to stay. They returned next day, according to promise. It was surprising to see how differently the boy viewed the bones — he took much interest in handling them, and asked many questions. The fear of the day before had disappeared.

Dr. Storey's case was certainly a peculiar one. He told us that when he was on the boat going to Catalina Island, "the other fellow" wanted him to go to the side of the boat, jump, and end it all; that he had all he could do to keep himself near the center of the boat.

About two weeks after first adjustment, he came in and said he had quite a time getting to our office; that "the other fellow" talked climate at San Diego and he talked adjustment at Pasadena. "But I got here," he said. To anyone but a graduate of The PSC, this language would seem strange.

A man met Dr. Storey in Los Angeles and called him by name. The doctor told him he did not remember ever having met him. The stranger said he ought to know him — he had been his nurse for three weeks in a hospital, and had given him lots of medicine. The doctor replied that if he had taken medicine he had not been conscious of it; there was a long period of time that was blank to him.

Dr. Storey had no remembrance of anything that transpired since seeing his son Tom in his Duluth office. First he realized was that he was walking on the street of a strange city. He inquired what place it was, and was told it was 'Frisco. He realized he was not right, mentally. He remembered he was a lover of flowers. Thinking the sight of them might place him in his right element, he inquired where he might find them. He had not yet discovered he was in "the land of flowers." From that time, he was partially conscious at times, realizing his condition; at other time, he was entirely unconscious, especially when "the other fellow" wanted to change to some other location, making an expense for the doctor. When he was himself, he was averse to spend his money.

One very warm day he was in Pasadena. "The other fellow" was running him all over town, which was not to his liking.

For two months, Dr. Storey was handled by two different in-

telligences — Educated never being fully conscious. When Innate had full control, Educated was not active. The moving of the doctor from place to place, buying tickets, doing the business usually done by Educated, was done by Innate.

After having the displaced cervical replaced, he longed for his family; but when he thot of returning home, there came over him a dreadful fear — so much that he did not dare to think of going to Duluth to settle up his business. He had a great fear of becoming insane again. He felt the need of keeping within calling distance of a Chiropractor. At times he would say: "Insane persons always think they are all right; if I am not, I want you to tell me so. I think I am, but I know I am not the one to be a competent judge."

Dr. Storey is now a Chiropractor in Los Angeles. His family is with him, enjoying the beautiful climate of Southern California.

The Story Of COUNT VON LUCKNOW

Count Von Lucknow was captain of the German raider, Emden, during World War I.

He came to Moline to address the Contemporary Club on his experiences during the war. Like many thousands who come to Tri-Cities, first place he wanted to see was The PSC with its sights. (Over one and a half million have visited A LITTLE BIT O' HEAVEN, and over seventy-five thousand have visited the B. J. Palmer Chiropractic Clinic on its guided tours).

Being a distinguished guest, it was our pleasure to give a personally conducted tour. Sitting in our office, he told interesting stories. (On the walls in our office is an autographed photograph of the Count).

One thing for which he was most regretful was that he was compelled to sink many allied ships during the war; and the one thing he was proud of having done was that, before sinking them, he took every man alive off board. He never lost one single life in all his raider career on seven seas. When he told this, one could see the pleasant twinkle in his eyes, because he was a lover of mankind.

When he was a young man, he decided to run away and take to the high seas. He wanted to become a sailor. When he left home in Germany, his father told him: "Don't return home until you are a captain in the army."

He boarded a tramp steamer which took him to various countries, finally landing in Australia. Walking down streets of Sydney, he saw Salvation Army on a street corner. Walking to them, he said he wanted "to join THE ARMY." They made him A CAPTAIN. He wired home to his father that he was now "a captain in THE ARMY."

Eventually he landed in San Francisco. He had always wanted "to meet your Boofulo Beel." He asked a man at the wharf, "Vear iss das Boofulo Beel?" The reply was peculiar: "See those rails over there? Follow them and you will land in Denver. There you will find Buffalo Bill!"

He finally arrived in Denver. Asking where "Boofulo Beel" was, he was told that Buffalo Bill was visiting Count Von Lucknow in Stuttgart, Germany — the home town of his father. Peculiar twist of circumstances, wasn't it?

We like to meet and know such interesting people, and hear these interesting instances from them.

The Story Of E. P. ADLER

In earlier years when we were struggling to get from under father's debts, and recovering lost personal standing in our community, we were arrested for "practicing medicine without a license." At this time, E. P. Adler was editor of The Davenport Daily Times. He wrote a most vitriolic, scathing personal editorial against us. It wasn't a professional attack, it was down-the-line personal, unwarranted, unjust, and uncalled for.

We called on Mr. Adler and told him what we thot of him, his paper, and his editorial. He listened attentively and then shot out two pieces of wisdom: "If you're in the right, you can afford to hold your temper. If you're in the wrong, you can't afford to lose it." "What you want to get into the paper is an advertisement; what you want to keep out of it is news."

We left in a worse huff than when we entered, telling him, "We will never speak to you again as long as you live." We lived up to that statement for twenty years. When we passed each other on the street, it was always with a look of contempt.

When Kiwanis International was organized in Davenport, we were invited to be a charter member. We joined. We attended regularly, for years. During that period the Kiwanis secretary was Mr. Al O'Hern. He was a Roman Catholic, as were his family consisting of wife, a boy and girl. He was also City Editor of The Davenport Daily Times.

Finally, Mr. O'Hern was compelled to resign from The Times and give up his job as secretary of Kiwanis, because of tuberculosis. He went to Arizona, lived there several years, until he died. After his funeral in Davenport, Kiwanis held a memorial meeting.

E. P. Adler and son, Phil, were invited. We met them on the mezzanine of the Hotel Blackhawk. Stepping up to Phil, whom we admired, we said: "There is one advantage your father has over you: he has a better son than you have a father — and we said it with scorn and bitterness. "E. P." said, "Maybe you're right. At least, I think so."

We walked away, and attended the meeting. During that meeting, the story behind the story came out. When Mr. O'Hern, the Roman Catholic, went to Arizona, it was E. P. Adler, the orthodox Jew, who sent him, paid transportation and living expenses while there, paid funeral expenses, sent his wife and children to visit twice a year while there, and paid their expenses. All this showed

bigness in E. P. Adler. We felt ashamed of ourself for having said what we did before the meeting.

We went to "E. P." immediately after, told him of our regret for our statement; asked him to erase it from his mind; to forgive us because we didn't know. "E. P." — big man that he was — accepted our apology in good faith. We told him then that from then forward we would be the best friend he ever had. We lived up to that until he passed away in spring of 1949. From that time forward, space was ours for asking, in both of his papers. Lyceum people have wondered how we got so much space — that's how.

On several occasions, in our rise from alley-rat to big business in Davenport, we had occasion to prove our deep respect for "E. P.", refusing to do things against him other men asked us to do. Eventually, news leaked back to "E. P." He would call by phone and thank us.

It was a long, hard struggle to keep on keeping on climbing the ladder, to ultimately win the personal and commercial respect of "E. P.", but we did.

(The rule of Davenport Kiwanis International is that if a member skips attendance six times in succession, he is automatically expelled from membership. We are one of the few remaining charter members. We continue to pay quarterly dues, but have not attended for more than nine years — and they still keep us a member. They have a reason but modesty forbids our stating it.)

The Story Of HEINRICH DUERRINGER

Heinrich came to this country as a German immigrant. He was a gardener on the grounds of a rich man near Stamford, Connecticut.

One day, a load of manure was unloaded on the grounds, truck turned over, and Heinrich was buried beneath. His body was jack-knifed; back fractured. He suffered great pain for years.

He went to one of our graduates in Connecticut, got relief, and became well. Now, being a convert to Chiropractic, he wanted to study it. He became a student in The PSC.

We understood Heinrich was very well educated in German, but he had difficulty in reading English. He could and did ask more troublesome questions, in class, than we could answer. He was always asking, "Why?" He was so persistent we considered him a class nuisance. In spite of this, he did learn Chiropractic as few others, then or since. He graduated with not much book larnin', but he got THE BIG IDEA. (Get The Idea, All Else Follows.)

He arrived in New York with \$10. He rented one large room on Columbus Circle. "Toots" (his frau) sewed together curtains and separated one large room into several smaller ones — so it seemed to them, even tho one could hear everything thru curtains from one "room" to another.

First patient to arrive began telling Heinrich what he wanted him (Heinrich) to do. Heinrich literally kicked him out of his office, and with him went first possible fee. Heinrich knew Chiropractic — and he wasn't going to have any patient *tell him* what rubbing or treatments he was to give. That patient went away convinced Heinrich was honest; that *he* was the doctor; that nobody could get anything he wanted in Heinrich's office. That patient sent dozens of patients to Heinrich, in months to come. One day he came back, telling Heinrich how many patients he had sent him. Heinrich's reply was characteristic: "You did them a favor by so doing. I told you once, and I tell you again, get out of my office and never come back."

Heinrich finally outgrew those offices. He moved to the Marbridge building on Broadway, opposite McAlpin Hotel. Whenever we were in town, we always called on Heinrich. He and Rufus St. Onge (Seattle) were the only two people with whom we ever broke that rule. Heinrich always took us to the McAlpin for lunch. He had one table reserved. It had to be ready at 12:00 noon. One day we went over, and somebody else was at HIS

table. Did he raise a howl! You could hear him all over the dining room. He forced the head waiter to move the folks.

Nobody could ever say anything against B. J. to Heinrich. If they did, they had a fight on their hands, pronto. We recall a banquet being given for us at the McAlpin Hotel one night. There were about three hundred present. Somebody said something against us. The fight was on! Heinrich was small, but he could shout, scream, and yell — and he did. It was all we could do to get him quiet so the banquet could go on.

Heinrich had one hobby: At 12:00 noon (not 12:01 or 11:59), lunch. At that time, no matter how many were waiting, he walked out the back door. Then he would walk up to Madame Trigger's — a fence for stolen goods. He would buy anything and everything, if price was low enough. He knew that she bought things at ridiculously low prices and, altho she tried to raise the ante, he always forced her down to a small margin of profit. Heinrich's home was a museum of a little of everything.

On one occasion he insisted we go to his home in Stamford, Connecticut, for dinner. He knew we liked lobster — so we had lobster soup, lobster boiled, lobster broiled, lobster tails, etc. "Toots" was a wonderful cook.

It was there we saw an Indian necklace of genuine elk tusks — 28 of them — any one is worth \$25 today. He bought them from Madame Trigger for 25 CENTS. We told Heinrich they meant nothing to him, but they meant much to us as an elk, and please give them to us. He never did. After he passed away, we met "Toots" in St. Petersburg, Florida, and asked her for them. She smiled. Later, she sent them and we have them at home today.

Heinrich had a very large practice. He had the bon ton Four Hundred elite of New York City. They came from all higher as well as lower strata. We recall going into his reception room unannounced and unexpected. Sitting in the room were two women. One was a typical Italian scrub woman. Her knees were wet from scrubbing floors; her clothes were rags; her face was wrinkled, and her hands red and calloused from hard work. Alongside of her was a woman of wealth. Her clothes were the last word in style and material. Her furs were out of this world. She had a lap dog. Behind her chair was her negress maid.

Heinrich came out and saw both women. "Which of you women came first?" he asked. The Italian woman who was afraid of her soul did not speak. The rich woman insisted she be taken in at once. He finally got both of them to admit the scrub woman was first. "Den you go right in." The rich woman was bitter. After the

scrub woman and Heinrich left the room (he had not seen us in the corner), we asked her what she thot of the doctor. She said, "At first I was bitter and had a notion to leave and never come back. The more I think it over, the more convinced I am he is an honest man and riches mean nothing to him. We who are rich are accustomed to having everybody kowtow to us; it comes as a pleasant surprise to find one honest man who doesn't." The woman proved to be Mrs. Duke.

One morning at 3:00 o'clock, we received a long distance call. It was a broken German voice. All it said was, "Heinrich is sick; come at vunce", and up went the receiver. "Heinrich" — yes, we had many of them. We tried to trace the call. We couldn't. We finally decided it must be Heinrich Duerringer, altho we did not know he was sick.

We caught the Golden State Limited at 4:00 a.m., to Chicago; caught the Twentieth Century Limited that afternoon for New York; wired ahead to have some boys meet us. We caught the next express for Stamford.

Heinrich's chauffeur met us at the depot and drove us to his home. Arriving about 10:00 a.m., we found an M.D. in the house. Mrs. Duerringer called him. This M.D. advised insulin shots because Heinrich had diabetes. Heinrich refused to take shots "unless B. J. said so."

We went upstairs to his bedroom. Heinrich was in a coma. We woke him up. He was SO pleased to see us. We returned downstairs and, told Mrs. Duerringer we could give him an adjustment, "but it would do no good because he was within a few hours of death." The next thing we knew, Heinrich was screaming at top of his voice, "I von't do it! I von't do it." We went back upstairs and found Heinrich's niece had told him we advised the M.D. to give him shots. We tried to awaken him to tell him we had done no such thing. He never regained consciousness. He died that afternoon, thinking we had betrayed him. Believe you me, that niece got told off, plenty. The liar!

At Lyceum, 1948, this chauffeur of Heinrich, who is now a PSC graduate practicing in New York, presented us a bronze bust of Heinrich which Mrs. Duerringer gave him after his death. We prize it highly. It is in the Osteological Lab, on a mirror shelf made from the old Chase mansion.

If we had five thousand Heinrichs in our profession, who would die in the faith of their convictions as he did, we could unite our forces, go out to battle and lick the enemy wherever found.

The Story Of POVERTY AND STRUGGLE

Many people, viewing The PSC as it is today, and home in which author lives, think it has always been that way — affluence and ease at all times and in all ways.

Let us pull back curtains, back up to earlier days, and see what happened.

October 7, 1949, we flew up from San Francisco to Portland, for Northwest Chiropractors Convention. We were met at airport by Dr. Firth. On our way driving to town, memory went back to our first trip there.

It was about 1907 — 42 years ago. We were desperately in need of funds to keep Davenport end afloat. We figured coming out here would be a quick way to pick up a few extra dollars, and at same time render a service. George Breitling, one of our early Davenport graduates, invited us to come to put on a series of lectures.

We were SO poor that we took the Northern Pacific, second class train, Tourist Pullman — an upper berth, at that. The upper was lower; the lower was higher; so we took the lower upper.

In that one upper were two people, magic lantern case, slides, and baggage. We slept with knees drawn up, bags at foot of bed; four nights of this. We took all food from home for this entire trip. It got stale before we arrived in Portland — five days from Davenport. This was a long time to keep sandwiches fresh. In one end of Tourist Pullman was a range on which we brewed coffee.

We arrived in Portland with twenty cents between us. Bought sandwiches and cups of coffee for breakfast — then we were broke. We started lectures at once. Received \$25 per person for one week's lectures, three times a day. That night we had \$200 in our jeans. We were rich. We had enuf to go home on, and \$100 to boot.

We were guests of Dr. Breitling at dinner that night, at some private club. It was first time we had tasted anchovies. We thot it was something spoiled. We got sick and excused ourselves for a few minutes. We always think of Dr. Breitling because that was the first real meal we had for six days, and we were too proud to ask him to lend us a couple of dollars.

We recall Dr. Breitling told us that some day he was "going on the road electioneering (lecturing) so I can talk also about licorice juice (electricity)." Also recall overhearing Dr. Breitling tell a male patient he was "suffering with a prolapsed uterus." Those were the good old days when one didn't have to know much

to beat the know-it-all M.D's, to get sick people well — and George Breitling did! Where ignorance is bliss, 'tis folly to be wise.

We had forgotten about that trip and hardships until we arrived, in 1949. Memories! Struggles! It hasn't always been milk and honey, or aeroplane trips like this one from San Francisco.

From then to now proves: There's always a ladder and room at top if one wants to climb hard enough, strong enough, and long enough. There's always an Innate to push if you're willing to permit yourself *to be* pushed. There's always a goal if one *has* vision. There's always an objective if one *remains true* to an honest and sincere conviction. There's always attainment possible if one remains steadfast to a correct principle and practice. There's always *one way* to success — as in this story — to get from where we were to where we are now, but it pays in the long run, regardless of whether road is rough or smooth. It paid dividends because we proved worthy of Innate's teachings.

The Story Of A RELIGIOUS STATION WOC SERVICE

Introducing Rev. B. F. Martin and Mrs. Amelia Schmidt Gobble.

As delivered by B. J. Palmer over the air, via Station WOC, Sunday, October 2, 1926, from pulpit of Edwards Congregational Church, Davenport, Iowa, U.S.A.

The history of man and of worlds is that of religious factions with frictions, with millions of murders committed in their various fair names.

If religion is good — if wars are bad — why can't good get into man and eliminate the other?

As a youth, we found ourself in conflict with much that we heard, saw, and found practiced in churches. We went beyond people INTO METHODS used to reach people. They were too much churchianity and too little Christianity.

We went beyond methods used TO PRINCIPLES INVOLVED. We investigated religions of the world, past and present. We studied sects, creeds, and denominations.

We traveled into native haunts of religions.

History is one monumental story of war after war, millions of men killing millions of men. Hatred has been and is everywhere prominent; intolerance is prevalent; jealousy between nations — therefore between its constituents — runs rampant. Yet EVERY religion teaches to defeat all that.

Religion, regardless of sect, creed, or denomination — is often accepted as a Sunday cloak; a script to be read; a creed to be followed closely on Sunday and loosely on Monday.

Too often, religion is a pious, dressed-up state of Sunday mind, with a skin-em-to-the-bone state of Tuesday mind, justifying six days of cheat-'em by the oft-told alibi that "business is business."

No greater epitome of language was ever said than "THE FATHERHOOD OF GOD AND THE BROTHERHOOD OF MAN."

It is preached all around, seldom on, and very little of it is in use. We have A FATHERHOOD OF GOD, and man kills man when it comes to a BROTHERHOOD OF MAN against man.

Why should this be?

No one man or group of men has a private path to heaven or

hell, or a special key to fit a private lock to the gates. That some ways seem better than others, after all, is a matter of geography and periods of world's history.

Man should better understand himself and his relationship of service to man and his duties while here in that relationship between man and his God; more than that is outside of the province of feeble man in the great scheme of things.

Religion should be an opportunity — regardless of what religion it is — to give man a better understanding of his place in the great scheme.

Man, however, often construes religion as an opportunity TO CREATE A SCHEME and FORCE all men to it, willy-nilly; and, if necessary, at point of sword, even to national murder, to bring it about.

Religion, if it has any purpose to serve at all, is a rule of living, a method of service between men and their places and duties in this world.

Average man who leads thinks THE WAY to lead is to superstitiously become a super-visioned, high-powered dynamite-'em-into-heaven-or-hell fellow.

Tendency of men, who become addicts of this religious game — is to go to seed, grow into ruts, narrow mentally in interpretations of their most holy responsibilities and duties they owe each other.

They grow serious — TOO damn serious.

You rarely find any man who plants seed, harvests a crop, paves the road, and mentally broadens in his pointing the way. They lose human touch and become inhuman, dogmatic, and domineering in action.

Every man, some day and in some way, must find himself in this great religious question.

Sincere and honest KNOWLEDGE OF A GOD and a sincere, honest WORKING ABILITY to serve everything natural, finally became the sole approximate principle for which we lived; every waking hour of every day, to every man with whom we came in contact — not on the surface, but a living principle to which we sold ourself; not plastered on from without, but flowing freely from within; not holding ourself out as a leader, yet numberless young men have asked for counsel, that they might better be directed to find THEMSELVES.

We eventually found OUR salvation — but it wasn't within

walls of average church building; nor was its wisdom spoken from mouths of average preacher.

Religion, on the whole, is scrambled words which produce confusion, manufacturing misunderstanding, creating wars. No one preacher, sermon, or creed — but all of them — produce this.

God was the Common Denominator of all time — all people.

WHY God could be sectarian; HOW God could be partial to one human color, or favor a special bit of geography; or close gates on all but thee and thou, failed to meet OUR concept of a just omnipotence.

There are no greater books than various Holy Bibles.

IN SPITE OF sermons we heard, IN SPITE OF jumbled words they preached, IN SPITE OF ancient language they spoke — we still found PRINCIPLES enough within their covers good enough for everybody when humanely and humanly interpreted.

MAN'S RELIGION was manufactured of words and printed; but GOD'S RELIGION is hidden within PRINCIPLES incorporated between those words.

Betwixt and between PRINCIPLES AND MEN were intermediary men. Intermediaries were not teaching so all who run could read. They mystified and made mysterious to us little worms on earth.

Churches were social organizations which catered rather than educated.

Preachers were led by rings in noses, by men who paid for carpets, when they should be leaders of simple life and thot.

Passion Play, as exemplified by Consistory Passion Players at Bloomington, Illinois, interests us because it makes the Bible speak; characters breathe; people live as examples; principles dig their ways into heads, hearts, and hands of those who go to see and hear.

We believed then, as we believe now, Mr. Darrah (the producer) and every one who has a part to play are doing more good to present people, are personifying a practical religion and rendering more Christian good than average preacher in average pulpit who prattles a language 2,000 years dead.

Preachers *preach* when they should be *talking* to human beings.

Why a preacher should talk in a sepulchral voice, and cease to be a human being when he enters pulpit, is beyond comprehension of him who listens in front; hence religious back-sliders every church confronts.

There was a time when church kept all in ignorance. Today, many men who have left church know more about real religion than many preachers in pulpits.

Why, then, go to church and waste time?

Preacher can no longer weave spider-webs, catch and hold converts. He must talk more understanding than his listener has. Average preacher delivers a nickel sermon to a dollar-mind congregation, and gets a pants button in collection plate, and a decreasing attendance from year to year — and wonders why.

As all churches are practically charitable organizations, preacher must nowadays deliver a five dollar sermon to dollar minds, and he will get quarters as compensation, and fill his church.

IN SPITE OF DECREASING CHURCH POPULATION, PEOPLE ARE CRAVING FOR RELIGIOUS MENTAL FOOD — and if ever there was an international shout to heaven, and a nation-wide necessity for tolerance, it is now; for in midst of a sea of spiritual good, we live in a desert of thirst.

People have become tired wasting time trying to find where it is served.

In spite of this apparently antagonistic attitude, there is a great potential good in the church movement, PROVIDING RIGHT MAN BE FOUND WHO COULD TALK TO PRACTICAL BUSINESS MEN OF THEIR NECESSITY OF LIVING A RELIGIOUS SERVICE SEVEN DAYS OF WEEK, IN EVERY-DAY COMMERCIAL TRANSACTIONS.

RELIGION IS A BUSINESS STATE OF MIND, AND BUSINESS MAN KNOWS IT; but successful business man who develops a growing business concern will not waste Sunday hunting for a bit of mental profit when he can go fishing or play golf and get a spiritual and physical profit on time invested.

We searched long and hunted far for that type of religious leader. We have listened to a few, such as Drs. Cadman, Bradley, Polling, Shannon, etc. They are big, broad, generous, and possess liberal interpretation which stimulates and awakens deeper recesses within men who think, and sends them home inspired to do greater things in greater ways.

These men possess ability to speak so they can be heard. Having found THEMSELVES, all they need is AN OPPORTUNITY to render same service to others who still grope to find themselves.

There are millions of practically inclined business men and women who refuse to belong to any church because of too much

theory and too little worth; realizing they couldn't run their business on same theories and methods that churches try to run on — and, if they did, businesses would be bankrupt.

What great good is accomplished with a human service hidden in a cave or dungeon?

What value is that which should be working being held static?

Even Christ went out on highways and by-ways broadcasting His message so multitudes could follow Him about, to hear more. Message of Christ is greatest needed commodity today. Christ message of 2,000 years ago was simple and plain. Superiority-complex minds of then failed of understanding.

Today, too many preachers preach a superiority-complex misunderstanding to minds that need the simple and plain. The message of then is as good today.

What is more appropriate, then, than that one who IS capable of selling it should be himself sold, so multitudes will turn on their sets or come here in person to hear?

In plain language, Station WOC has found a religious diamond in the rough and proposes to turn him over to the air to be polished.

We have found such an ideal man in Davenport. We cannot call him "preacher", for he is more than that. We cannot call him "pastor" for he is greater than that. We hesitate to call his talks "sermons" for they are broader than that. We prefer to call him A BIG BROTHER IN THE BROTHERHOOD OF MAN, surrounded, if you please, with SMALL BROTHERS WHO DESIRE TO ABSORB WHAT THE BIG BROTHER CAN RADIATE.

We have interested the Board of the Edwards Congregational Church to permit us to give him an audience worthy of his mind and message; to permit him to speak so that all so inclined may listen to his reason, that they also may reason.

This man is Dr. B. E. Martin who will now speak to you every Sunday morning and evening direct from the Edwards Congregational Church, thru Station WOC.

This man is not afraid of his shadow; he has courage of a Daniel; he is religiously aggressive and commercially progressive.

He knows business man's mind and deplores that he doesn't buy religion. He knows why — and proposes to adjust those differences.

He is generous to a fault, lovable in character, liberal in concepts.

He is a brilliant mind that has been long hidden under a church spire.

He has messages that have been given to small groups, worthy of being given to all the world, to listen and heed.

And, before misconceptions may arise, we now state we are NOT a member of his church (or any other, for that matter, for reasons herein expressed), but we have found a man who would satisfy our reasoning mind and thereby desire to give him audience, that he may lead other men as he has directed us.

In presenting Dr. Martin to listeners of Station WOC, we know you will hear a man who will awaken you, stir you, rouse you to become greater than you are; make practical a religious reconstruction of yourself; make you a man's man in religion, without becoming a namby-pamby in passive theories.

He talks language which practical minds readily grasp. He is a he-man's man. We predict for him one of the big radio audiences of America, given time. We further prophesy he will talk to packed houses here every Sunday morning and evening, as soon as you know him.

Yesterday, music in church was of the devil.

Today, music in church is exhaltations of physical discordances, making possible inhalations of spiritual uplift.

Music opens flood-gates of human desires. Whether you sing, hum, or whistle, it develops and envelopes one to let the great within surge outward.

And who will gain-say music is not half of the service!

Director of music at this church is Mrs. Amalia Schmidt Gobble. Born of German stock — and who loves fine music better than Germans — she was nursed and fed on music all her life.

Her father was in music business; all of her brothers are in music trade here. Each member of the family and his family are musicians of highest caliber. They represent, in this community, all that is highest and best in music in every way.

Out of this environment comes Mrs. Gobble, who poetically loves beautiful music expressed in its highest terms.

Many of the best musical programs which have passed thru WOC have been directed by Mrs. Gobble. She is one of God's noble characters, and is loved by all who know her.

Mrs. Gobble will wield the baton daily in these services, as she

has done for years past. That promises you very best music, of a very best musical training, of a very best musical family which has always had only best there is in music.

Were I asked to pick a person to musically tally with mental caliber of him who will talk from this pulpit, it would be Mrs. Gobble.

Up to this time (1927), more than 200,000 people have come to Davenport at the solicitation of Station WOC. Of this number, practically one-half came during the afternoon. Of this one-half, two-thirds came Sunday afternoons to visit Station WOC and A LITTLE BIT O' HEAVEN.

Come earlier, arriving by 10:30 a.m., and hear Dr. Martin in person. It will give you an opportunity to drop your contribution in the plate, rather than possibly sending it by mail.

The Story Of D. D. PALMER'S SKELETON IN THE COURT HOUSE

On pages 625-626 of "The Story of 'WITH MALICE AFORE-THOUGHT' in Volume XXII, THE BIGNESS OF THE FELLOW WITHIN, is an account of the arrest of D. D. and B. J. Palmer.

D. D. Palmer was convicted, sentenced to jail until his fine of \$500 was paid. Being found guilty, when asked if there was anything he had to say before sentence should be passed upon him, D. D. took into court room a human skeleton, and proceeded to give judge, jury, and courtroom of people, a lecture on Chiropractic — using skeleton to illustrate his ideas.

In confusion and mess that followed (as explained in book mentioned above), everybody seemed to have forgotten about the skeleton.

Scott County (Iowa) Court House was built away back when. It is a massive, heavy stone construction. It sits in middle of a block, with County Jail in rear.

Underneath this building, diagonally under its basement, runs a creek with sand base.

This Court House had a high tower, up 150-feet from its center. As a boy, many were the times we used to climb up there to see the country around.

Down thru years, this building has had its underpinnings washed away. Building constantly kept settling; walls cracked; plaster fell. To try to preserve building, tower was taken off, to relieve weight. Walls were bolstered up.

In spring of 1947, County Recorder called to tell us there was a skeleton in the high dormer walled garret. He asked if we would come down and get it.

Upon arriving, we found tag attached, stating it was "Exhibit A" in the trial of D. D. Palmer in 1906 — 41 years previous.

Skeleton was in a state of perfect preservation. It now reposes in our PSC Osteological Laboratory.

Peculiar circumstance, wasn't it?

The Story Of D. D. PALMER — HIS LIFE, PERSONALITY, AND PECULIARITIES

(For further data upon this subject, see P.119 and beginning on P. 142, *THE MAN WHO MADE US, WHOM SOME NOW DENY*, in *THE BIGNESS OF THE FELLOW WITHIN*, Vol. XXII, Palmer, 1949.)

(Parts of this talk were delivered at D. D. Palmer's birthplace, Port Perry, Ontario, Canada, September 10, 1949, as guest speaker of The Women's Academy of Chiropractic of Toronto, Ontario, Canada, on Palmer Memorial Day.)

This monument, erected by the National Chiropractic Association, at the town-sight of D. D's birthplace, was an attempt to duplicate his gigantic monument at Davenport, Iowa. This monument is an honor to D. D. Palmer. It is a disgrace to those who erected it. D. D. Palmer discovered and defended pure, unadulterated, ten-fingered, by hand-only, exclusively-backbone Chiropractic.

The NCA has insistently, persistently, and consistently denied his all-inclusive and all-exclusive principle and practice. They have been and are advocating any and all pro-medical methods, belly and privy practices which he denied and condemned in no uncertain language. D. D. Palmer would be first to vehemently damn them and everything for which they stand. If present here today, he would be honored by the monument but dishonored by those who erected it. He would be first to appreciate honor of this monument and first to condemn those who erected it. In his absence, we do it for him.

(Correspondence after our appearance on this program criticized us for speaking frankly and openly on the personality of D. D. Our justification is that D. D. Palmer would have had it no other way. Our mind is practical, factual, dealing with facts — not fiction.)

In his book, D. D. says this of his birthplace:

"I was born on March 7, 1845, a few miles east of Toronto, Canada. My ancestors were Scotch and Irish on my maternal side, and English and German on my paternal side.

"When my grandparents settled near the now beautiful city of Toronto, there was but one log house, the beginning of that great city. That region was then known as 'away out west.'

"I came within one of never having a mamma. My mother was one of a pair of twins, one of whom died. The one who lived weighed only one and one-half pounds.

"When a baby, I was cradled in a piece of hemlock bark. My mother was as full of superstition as an egg is full of meat, but my father was disposed to reason on the subjects pertaining to life.

"I was a magnetic healer for nine years previous to discovering the principles which comprise the method known as Chiropractic. During this period much of that which was necessary to complete the science was worked out. I had discovered that many diseases were associated with derangements of the stomach, kidneys, and other organs." Page 17.

"One question was always uppermost in my mind in my search for the cause of disease. I desired to know why one person was ailing and his associate, eating at the same table, working in the same shop, at the same bench, was not. WHY? What difference was there in the two persons that caused one to have pneumonia, catarrh, typhoid, or rheumatism, while his partner, similarly situated, escaped? WHY? This question had worried thousands for centuries and was answered in September, 1895." Page 18.

(The Chiropractor's Adjuster, by D. D. Palmer.)

He was a rough, gruff, hard-fisted, tough character. He was self-made, educating himself, in manner described in Vol. XXII.

After this monument at Port Perry was dedicated, some person there who knew father reported that father studied medicine. We have never heard father state this, and it is doubtful that it is true.

Father, his three brothers, four sisters, and his father and mother moved to United States sometime between 1861 and 1865, during Civil War days — exact year not now a matter of record. He was either sixteen or twenty-one years of age at that time. Coming to U.S. during Civil War times, it was either go to war or buy a substitute. We have heard D. D. tell that he bought a substitute for \$500 rather than go to war himself. To shoot to kill was against his principles.

"Dr. Palmer tells us in his Chiropractic textbook that he was born 'a few miles east of Toronto, Ontario, on March 7, 1945.' This place we now identify as Port Perry in a well-developed area. What it was in 1845 can be imagined from this sentence in Dr. Palmer's too-brief autobiographical sketch:

" 'When a baby,' he writes, 'I was cradled in a piece of hemlock bark.'"

"However well-to-do the Palmer family might have been for those times, it is evident that the boy was subject to few of the softening influences which we now accept as essential features of civilized living. From residents of Port Perry we have learned that 'Dan' was a 'keen youth' — a big, strong, husky, country boy, popular with everyone', constantly seeking knowledge about anything and everything, but singularly interested in anatomy. That interest he showed in collecting bones of animals. All who knew him describe him as a hearty, merry boy who exhibited, even in childhood, evidences of an exceptional mind.

"Daniel Palmer's paternal ancestors came to this continent from England, and settled in New York state. His grandfather, Stephen Palmer, emigrated to what was then known as Canada West, now the Province of Ontario, where Daniel's father, Thomas Palmer, was born in 1824.

"Thomas Palmer was a shoemaker, later a grocer. Publicly, he served his community as a school director and as Postmaster. He and his wife, who had been Catherine McVay, had three sons and three daughters. The sons, besides Daniel, were Thomas J. and Bartlett D. Palmer. The daughters were Lucinda Mariah, Hanna Jane and Catherine.

"The great Civil War in the United States caused hard times in Canada, when men fleeing from the army draft overran the Canadian labor market. When Daniel Palmer was twenty, he and his brother, Thomas J., decided to seek their fortunes south of the international line and so, with their belongings packed in a carpet bag, and with \$2.00 borrowed from friends—according to Thomas J. Palmer's Autobiography—they struck out on April 3, 1865. They walked 18 miles, to the town of Whitby.

"There the trail is lost, temporarily. We are told by Thomas J., however, that they reached Buffalo in one month and there spent their last penny for passage to Detroit. On arrival, they slept on grain sacks on a pier, breakfasted on a persimmon which they found, and went job hunting, which evidently brought prompt results.

"Their next stop was Chicago and there they contrived, in some way, to get permission from the commander of a military train to ride with his troops to Davenport, Iowa. There, as you know, Chiropractic was discovered, and Chiropractic history was made. There Daniel David Palmer was imprisoned on a charge of 'practicing medicine and surgery without a license', although he shunned and abhorred drugs and, of course, never even attempted to practice surgery. Actually, his offense was that he had driven a spear of truth through the armor of guesswork and witchcraft shielding a profitable privilege.

"As he never was known to be lacking in courage, his departure from Iowa must have been dictated by strategy, rather than by fear. Instead of wasting his energies in a ceaseless contest—which had already cost him his money, his school, his library, and his osteological collection—he went to what then was the Territory of Oklahoma, another land of pioneers, where the law had not yet been distorted to meet the demands of therapeutic monopolists.

"His brother, Thomas J. Palmer, had preceded him to Oklahoma, and probably induced him to remain there, for it appears that California had been the destination originally decided upon. Under the date of May 30, 1906, is this entry in Thomas J. Palmer's diary:

"My oldest brother (D.D.) and his wife came to town last evening. They were on their way to the Pacific Coast. He has recently discovered what he calls Chiropractic, a system of removing disease by adjusting vertebrae in the spinal column which, becoming misplaced by falls or strain, impinge the nerves and prevent their distribution to the life-giving vitality. He has developed it into a science, which will make his name immortal."

"Oklahoma was then in the 'boom' phase of its development, and any properly conducted business was a veritable gold mine. Probably at the suggestion of his brother, the Discoverer of Chiropractic became, temporarily, a merchant in the rapidly growing town of Medford, not far from Oklahoma City, the state's metropolis.

"The store prospered, but the Palmer ownership was brief. The proprietor was concerned with something more important to him than making money in the mercantile business, grain, livestock, oil, or mining, all of which were enriching enterprising new citizens of the territory. Even while he operated the store, his home was a veritable clinic and school of Chiropractic. The next step was inevitable—a clinic and Chiropractic College in Oklahoma City."

(From "The Life of Daniel David Palmer, Discoverer, Developer and Founder of Chiropractic," by Dr. C. Sterling Cooley, Tulsa, Oklahoma. Originally delivered March 6, 1943, at the Annual Palmer Memorial Banquet of the Associated Chiropractors of Ontario — Royal York Hotel, Toronto, Ontario.)

Sterling Cooley and others, including NCA — even to quotation on D. D.'s monument at Port Perry, Ontario — have oft-repeated the following, attributed to D. D.:

"I have never felt it beneath my dignity to do anything to relieve human suffering."

By itself, this could mean "ANYthing" including the gamut of all physiotherapy and naturopathic methods. That is why NCA quotes it isolated, by itself. What ARE the facts?

We quote from article by Loretta Perkins, D.C., in International Review of Chiropractic, January, 1950:

"It has often been said that the Bible could be used to prove or disprove anything, depending upon the way it was quoted or misquoted. When you take a part of a quotation and can mis-represent the writing and message of the writer with the possibility of causing great harm.

"We have a serious example of this kind of mal-use of a writer's words. Time and time again, D. D. Palmer has been quoted as saying, 'I have never felt it beneath my dignity to do anything to relieve human suffering.' This statement alone can and has been misinterpreted grossly; misrepresenting the motive of the writer which would have been practically impossible if the complete quotation had been used. In fact it is an integral part of the following excerpt from 'The Chiropractor's Adjuster.'

"Bunions and Corns

"The amount of agony and torment suffered on account of corns, bunions and ingrowing toenails is beyond estimation, as the parties who suffer from their presence are not sick and often suffer without complaining. Our business, as Chiropractors, should be to relieve human suffering, no matter whether it comes from a corn or cancer. It is a general opinion among the laity that Chiropractors know nothing about corns, bunions or ingrowing toenails, in that they are right.

"I have never felt it beneath my dignity to do anything to relieve human suffering. The relief given bunions and corns by adjusting is proof positive that subluxated joints do cause dis-ease."

"After reading the complete section, which is the only procedure in my estimation to try to fully understand D. D.'s philosophy, we gain a greater comprehension of his attitude. The danger has come from the individuals and groups who have been using this 'quote' as an explanation or excuse for their liberalizing and expanding what they understand to be Chiropractic, and more dastardly using D.D.'s name. This would not seem to be a very sound thing to do in the face of a few facts that can easily be determined by a further study of D.D.'s writing in his many references to what Chiropractic is and more especially what it isn't."

By itself, this isolated sentence could be made to imply what NCA wants it to mean. When attached to subject matter of

"Bunions and Corns," it takes on a constricted and restricted meaning. When taken in conjunction with his entire book — practically 1,000 pages — it is as plain as day that he meant to and did apply this statement ONLY to "Bunions and Corns." *Nowhere else in his book does he go beyond that deviation from the spinal column. In all the rest of his book he denies value and use of "ANYthing" beyond adjustment of spinal column.*

"My Impressions of D. D. Palmer"

By Frank W. Elliott, D.C., Denver, Colorado

"My first meeting up with D. D. Palmer was at 4200 South Grand Avenue, Los Angeles, California, about May 5, 1911. I had leased an apartment at that address and was establishing myself as a Chiropractor. I had placed a neat little sign on my lawn announcing the fact. D. D. came by with a Real Estate Agent and rented the adjoining apartment. I saw them as they came out of the place. In a few days they, D.D. and Molly, his wife, moved in. He put up a big sign in front of his place, reading, "Old Dad Chiro, Discoverer and Developer of Chiropractic, D. D. Palmer." It was in this way I was introduced to him and his eccentricities.

"It was not long till we were in daily conversation. When he found out I was from The PSC, he began to 'educate' me on the 'facts' about his 'raw deal' from his son B.J. On one occasion, in his apartment in the presence of his wife, he was berating B.J. and telling me his angle of the reasons for his leaving Davenport. He became almost wild and highly excited and made statements which I knew were untrue. So I had heard enough and I let him have the facts as I knew them to be true. His wife Molly agreed with me and that made him more bitter than ever toward B.J. He made many very derogatory statements about his son and did not seem rational.

"About June 1st, 1911, B.J. and Mabel Palmer came to Los Angeles on a business and pleasure trip. They looked me up and I spent many happy hours with them sightseeing around the city and enjoyed a trip to Catalina Island.

"Hazel and I were planning our wedding in June, so it was set up so that the Palmers could be present. Mabel Palmer was my only relative present at the wedding. During their stay on that trip they were my house guests. The spare room was separated by a four-inch wall from D. D. Palmer's house. Knowing the feeling of D. D. Palmer for his son, I would not allow the two to meet at my place. But D. D. Palmer delighted to get out on the sidewalk along side my apartment and sweep the sidewalk underneath the window of the room used by B.J. and Mabel. He did this every morning they were there. He discontinued it when they left.

"D. D. Palmer did not know that I was related to Mabel Palmer until after this time. After they left, he reproached me and wanted to talk again about B.J., but I would not let him say anything more. While in Los Angeles, B.J. received a wire from the PSC which caused him to ask me if I would consider coming back to the school. I told him 'Yes.' When they got home, and in a few days, I was called back to The PSC and was installed as Registrar as of August 11, 1911.

"When I told D. D. Palmer I was going back to The PSC to be on the staff, he countered with a statement that he, too, was going to be in Rock Island, Illinois, about the time of Lyceum in latter part of August. He did go, both

he and his wife. After his arrival in Rock Island, Mr. Con Murphy, an old friend of the Palmers and a prominent attorney of Davenport, and I went to see him looking to an arrangement with him whereby a reconciliation between father and son might be had. At first he was not interested, but after Con Murphy had talked to him some time he agreed to be B.J.'s house guest in Davenport. He promised to be good and not start any arguments and we assured him that B.J. would be a kind and courteous host. It was during that visit with B.J. that the only picture of D. D. Palmer, B. J. Palmer, and David D. Palmer was taken with B.J.'s Graflex, by me—also the shot used so much by D.D. in the rustic chair.

"My recollection of the 'famous parade' and the circumstance has been well documented in B.J.'s Vol. XXII and only one item was lacking—I was at D.D.'s side during the time B.J. was trying to get D.D. to take his place in a special car in the parade. I finally got disgusted with him when he ordered the band to start the parade. He said old 'Dad Chiro' would lead the parade or else. I took him forcibly by the arm and started for the sidewalk and when he wanted to go down the hill I still held his arm. He started to run—well, he was much too spry for me—he broke away and actually ran down the hill. By this time the parade had started and I joined my place in a car provided for the faculty. There never was the slightest chance of his being struck by B.J.'s Velie Sport Coupe—of this I swear.

"D. D. Palmer was a very peculiar man. He was so argumentative that he irritated everyone whom he contacted. At times he was most affable but one had only to express an opinion and the war was on so far as he was concerned.

"He was a brilliant self-educated man in many respects and on Chiropractic a logical and clear thinker, but on most other subjects he was erratic and belligerent. With all his faults, God rest his soul, he left for us a splendid heritage which we must preserve and develop for the benefit of posterity.

"More could be said, but I will leave that to others who are better fitted to write."

"The Occasion for the Origin of the Name 'Chiropractic' "

**By Theodore Schreiber, Ph.D., D.C.
Dean, Kansas-State Chiropractic College,
Wichita, Kansas**

"The oldest book on Chiropractic as published by the Palmer School of Chiropractic was copyrighted with the Library of Congress under date of October 29, 1906. Its title reads as follows: 'The Science of Chiropractic, Its Principles and Adjustments.' 'Dr. D. D. Palmer, Discoverer and Developer of Chiropractic' appears as the author of the volume and B. J. Palmer as the secretary of the P.S.C. and 'the compiler' of this work.

Much comment could be offered on these few historical facts, but the purpose of this brief study is to concentrate on the occasion for the origin of the name Chiropractic. Therefore, without further ado the writer will confine himself strictly to relating some facts pertaining to this feature only.

"According to the 'compiler' the story is simple and short:

" 'The Rev. Samuel H. Weed. . . met Dr. D. D. Palmer in 1894, after his daughter had been wonderfully cured by magnetic healing by the doctor, of

a sprained ankle that threatened her life. The doctor then relieved him by magnetic treatment of splenic trouble by which he had been laid aside from preaching. Mrs. Weed and little daughter took Chiropractic adjustments early in 1896 and were much benefitted, after which Mr. Weed also received adjustments for sciatica and got relief. About this time the doctor asked him to suggest a name for the new science and art. He simply translated the doctor's description of it, "done by hand," into Greek, and thus originated the name Chiropractic.'

"It is of interest to learn that D. D. Palmer reprinted almost verbatim the above two paragraphs in the only book he ever published and copyrighted himself in 'The Chiropractor's Adjuster' of 1910/11, page 105. On the pages 102 to 104 two letters written by Reverend Weed to D. D. Palmer are photo-statically reproduced attesting to some of the claims as to origin and development of Chiropractic justly made by D. D. Palmer. Among other items we read that Rev. Weed credits D. D. Palmer with having 'asked him to translate "done by hand" into Greek,' and that he (Weed) 'suggested two almost synonymous words of that meaning, of which the doctor chose one, namely, *Chiropractic*.' The letter is dated 'Monmouth, Illinois, March 27, 1908.' The passages as underlined here appear so in the letter.

"Ever since the writer became familiar with the two classics on Chiropractic, the one of 1906 and the other of 1910, he has tried to trace certain aspects of Chiropractic. ***** Two years ago he succeeded in locating two of the surviving daughters of Rev. Weed—both of whom were patients of the founder of our profession. Of course, the first step the writer undertook was a visit to Monmouth, Illinois, but the trip did not bring anything of great value to him. He found out that Rev. Weed had lived there and that one of his daughters had graduated from Monmouth College as the father had done before. Even so, his search continued, though the whereabouts of the minister's children were unknown there. To make a rather romantic story short, he contacted the sisters Georgia and Katharine, the only survivors of the family, while a third one, Martha by name, was largely responsible for her father's acquaintance and lasting friendship with the discoverer of Chiropractic.

"Two long hand-written letters were received, one from each, independently written and a thousand miles apart from one another, are in his possession to bear witness as to the occasion for the origin of the name Chiropractic.

"'In 1893 my sister Martha,' writes Georgia Weed from Florida, 'met with an accident in which the ligaments of one of her ankles were so badly turned and destroyed that her foot was left dangling. Five different M.D's advised her to have it amputated as they said it was so badly injured that the ligaments would never grow back and gangrene would soon set in. Instead it was held in place with one hand while bathed with the other in very hot salt water; then bandaged from the toes well up the leg. This was done two or three times a day for eleven months; and still the foot would drop down unless held in place. Then some one advised her to try D. D. Palmer, who was a magnetic doctor. She did. And in a few weeks was walking without crutches. Although she wore a support on her ankle for a time, this too was eventually dispensed with. That was in 1894.

"'My father had been an invalid for years with T.B. of the lungs, sciatic rheumatism and dropsy. My sister persuaded him to try Dr. Palmer. For some time Dr. Palmer came to the house to treat father. Then as he improved he went to Dr. Palmer's office for his treatments.

"'Once when he went Dr. Palmer told him that he had developed a new method of treatment and explained it to father. Then after it proved so help-

ful, he asked father to name it. He wanted a word derived from the Greek meaning "done by hand". Father made suggestions and finally Chiropractic was established as the name of the science and Chiropractor as the name of the practitioner. Thus two new words were coined.'

"Here a comment might be in place. In our 1906 source a 'List of Greek Words' appears on pages not numbered but covering two and a third pages. From it we can judge how thorough Rev. Weed was in finding a possible name for Daniel David Palmer's 'doing by hand.' The last three named were 'chiropractic,' 'chiropraxis' and 'chiropraxy,' either one of them meaning 'the science and art of doing by hand.' Those having any of the later three editions of PSC Vol. I, cut as they are, will find the above retained.

"The story as told above by Georgia Weed is substantially repeated by her sister Katherine. However, she recalls other data in this connection that might be worth our while. For instance she writes among other things the following:

"I was a frail child always troubled with constipation, catarrh and croup. Father took me to Dr. D. D. Palmer when I was 3 yrs. of age.

"Again when I was 7 I remember being taken to Dr. Sale, and having to swallow quinine capsules and taking other medicine. Then Father and I made a number of visits to Dr. Palmer in Davenport, again. Father had, at that time, dropsy. There was a sack of water, about $\frac{1}{4}$ teacup full, on his knee. Again he recovered, and no doubt I was benefitted.

"I remember Dr. Palmer's apartment on the 4th floor of a building on, I believe, 2nd Street in Davenport. I remember the elevator in the building. Remember the alligators in a large glass tank of water; remember his large collection of rattlesnake rattles. Remember the deer-heads with locked horns, which adorned the living room. Remember Dr. Palmer's kind, gentle manner of adjusting. He never charged for adjusting me; he said it was because I was good and took the adjustments well.

"Mrs. Palmer (not the first one, and not the last one) gave me a couple of shells that she had picked up on the Gulf coast of Florida. She had B.J. who was then 17 years of age, and whom they called "Bart" come in and play the piano for us once.

"In later years (we moved to Monmouth when I was 10 years old, and Father was 60) I remember that Father received a great deal of literature from the Palmers and a number of pictures. I remember one row of about a dozen photos of B.J. Father did some printing for Dr. D. D. Palmer in the early days, as Father had a printing office in Colona, too. I believe it was during the first course of treatment that Dr. Palmer asked Father to name his method of treatment, and so he formed the words "Chiropractor" and "Chiropractic", etc.'

"This, then, is the story as it is recorded both by father and son, by Reverend Weed and two surviving daughters of the clergyman. In the annals of Chiropractic we must never forget the man who coined the very words by which he designated our profession."

D. D.'s first move was to New Boston, Illinois. He established and purchased his first home known as "Sweet Home" — not "Home Sweet Home". He so named it because there was a young forest of locust trees on the farm. This farm was located "up the river road about eight miles" from New Boston, Illinois.

He took advantage of locust trees and became "the largest bee

raiser in the United States." Every year he took honey by carload to New York City. He would come home \$5,000 richer. He often told about how he "came home with a growing tumor pinned inside my undershirt."

He married his first wife here. Our half-sister is buried on top of hill on this farm. Half-brother, Frank, was born here. He died when twenty-one, and is buried in Oakdale Cemetery, Davenport.

About fifteen years ago, (1935) we drove to New Boston, contacted D. D's old friends, Will and Mary Kellogg, wishing to visit "Sweet Home" for our first time. Will got in the car, directed us. We drove "up the river road" about eight miles. As we passed one farm, we told our chauffeur to stop. Pointing to the farm, we told Will *this* was THE farm. Will said it was farther on. We insisted he was wrong. Will told the driver to drive on, insisting it was farther on. Altho we had never been there, we recognized it, even though Will had been there hundreds of times. How did we know, never having been there? We recognized the basement on side of hill. We knew the grave was on top of hill.

From New Boston, Illinois, D. D. moved to What Cheer, Iowa. There he married his second wife, our mother. Our sisters, Mae and Jessie, were born here. Mae was four years older, Jessie two years older than we. (Jessie passed away in Bellingham, Wash., Feb. 1950.) Mae is now seventy-two and Jessie was seventy. One son (ourselves) was born at What Cheer, Iowa, September 10, 1881. There is a discrepancy of one year in our birth. Family album (which we have in our museum at Clinic) gives year 1882. Family portrait which father had made in quantities and gave away to patients, says 1881.

Father started in business peddling fish in a wheelbarrow. He went about town tooting a horn, to notify people he had fish for sale. He bought fish from Mr. Barr, in Davenport. We have often wondered if this contact was his reason for later coming to Davenport. He was then known as "Fish Palmer" which Morris Fishbein (formerly Editor of AMA Journal) used, to make light of D. D's beginning.

We recall when we were asking the Iowa Legislature for a Chiropractic Practice Act, this epithet was used against us. They used it to belittle his schooling. One of our good friends in the Senate, to offset this, pointed to a certain Senator and said: "What of it? I know one Senator who was once a barkeeper in a saloon."

Later, father started a grocery store.

Four brothers, four sisters, his father and mother lived over the hill at the edge of town. We made one visit to their homes, which were alongside of each other. Aunt Verne smoked cigars — strong ones. Uncle Bart, after whom we were named, was too lazy to breathe. He was town's loafer. Uncle Tom was ambitious — not a lazy hair in his head; owned, printed, and ran THE WHAT CHEER PATRIOT, a weekly newspaper. When father advertised grocery goods, he had to pay cash at same rate as anybody else. When any of his family bought groceries, they had to pay cash or they couldn't take goods out of store. It was a cash and carry store.

Father was a stubborn, bullish English-Canadian. Combination of Scotch made him thrifty in buying and selling. His Irish made him tell and appreciate good jokes. The English and German made him firm in convictions and last to yield to anything but logic, reason, and facts.

Mother was from Louisiana, a Creole, a cross between French and Spanish.

Where or how father met mother is to us unknown. Whether he visited South, or she visited North, we have no idea.

We were born in Iowa. Funny how we all got together.

Father hated music. He would not go across the street to hear finest music in the world. Mother loved music. We do, as another story in Vol. XXII suggests.

In early days, father's Magnetic Cure and Infirmary occupied entire fourth floor of the then Ryan Block, later Putnam Building, on Brady Street (which runs north and south) and Second Street (which runs east and west). The front room on fourth floor of building at intersection of these streets was the reception room, and in the corner was a projecting bay window.

In these early days of the tenderloin district in Davenport, the Salvation Army was a militant organization, consisting usually of ten to fifteen men and women in uniform, and anywhere from ten to twenty followers who were in daily parade behind the band of Salvation Army. They would march thru tenderloin district, fifteen to twenty blocks, and finally stop on west side of Brady at Second Street, playing immediately under window of D. D's reception room on fourth floor above. Every night band would play. They would sing, plead and give testimony.

Father abhorred music — detested it. We heard him say many times he would not walk across the street to hear the finest sym-

phony or pipe organ in the world. We have known him to slam down windows to keep out noise of bands in passing parades. Peculiar that in later years he wrote much about "tone" in functional physiology in health.

Naturally, hating music, with them playing under the windows every night, he figured ways and means of trying to discourage them. He protested to Mayor and Chief of Police, who replied that Salvation Army had as much right to stand on street corner and play music as he did to drive his Nip and Tuck ponies on the streets. Frequently he would get buckets of water and throw it down on them. They would look up, in their forgiving manner, and shout back, "Lord, forgive them, they know not what they do!"

What interests us more is that Mrs. Villa Thomas — father's sixth wife — was as much a singer as a screech owl or a howling hyena on a prairie. Father had a Schiller piano, painted black, which Dennis Hickey, father of the Hickey brothers, sold him. He moved the piano to that corner by the window, over the Salvation Army below. We played "The Holy City," his wife spewed forth great gobs of mouth screechings, singing "Jesus, Lover of My Soul," Salvation Army beating the drum, cornets tooting, and Salvation Army lassies singing "Have Courage, My Boy, to Say No," the gathering audiences enjoying the three-ring circus. D. D. thot this was good advertising as well as giving vent to his disgust against music, to cause people to talk about him as a healer of the discordant ills of the sick. We have no idea who was trying to save whom from what, but it was evident all were working to beat hell.

Picture was interesting. Here was the Salvation Army with band playing and singing; father's wife yelling out the window and screeching hymns; audience down below applauding both and egging on the fight to see who could make most noise to outdo other. It actually was a contest of noise. That kept up for months. We do not recall which outdid the other.

Mother was a lady of culture and refinement. She owned nine hundred slaves in a parish on a plantation in Louisiana before Civil War. Possibly outcome of that war was what made her destitute and drove her North to seek newer pastures.

Down South mother always had breakfast in bed, in late morning. She did same in What Cheer. Father called her lazy and indolent. She always had toddies in bed before breakfast, down South and up North. As a baby, we tasted liquor in mother's milk. We liked it because mother would give us a few drops each day from the bottle. Father saw we had a hankering for liquor. He finally decided he wasn't going to raise this boy to be a drunkard. So when we

cried for it, he gave us all we wanted, then poured it down us. We hovered between life and death for six weeks.

What Cheer was a western frontier coal mining town. It was that kind of town that later developed into frontier mining towns of the West. It was the talk of the town that if we died our father "would be lynched for murdering his son." Fortunately for him, we lived.

From those drunken days, we had forced upon us a liquor complex. It is well known we have never taken liquor in any form. In later years, many banquets were given us, where cocktails were served. Plain water in colored glass, or colored liquor in plain glass, or liquor second-handed on someone's breath would make us throw-up immediately, getting deathly sick. We always made it a point to inquire whether or not liquor was to be served. If it was, we would wait until glasses were removed, then we would come into banquet room.

Mother died when we were one and one-half years old. She and D. D's parents are buried in What Cheer, Iowa. We carry only one faint recollection of father lifting us up to look into the coffin and seeing mother "asleep."

From What Cheer, father moved to Letts, Iowa. There he taught a crossroads country school, with children of various ages all in one room. It was while teaching school at Letts, that one night a spiritualist held a seance in the school room. She came down to father who was sitting in the last row, aisle seat. She said, "You don't believe in our grand and glorious philosophy. I see 'Dr. Palmer' on a glass door. People are coming to you from everywhere. I see a large lecture hall; you are delivering talks to large audiences on a new subject. You are going to start something that is going to be heralded far and wide." Father laughed at her, considering the idea ridiculous.

Years later, father attended annually the Mississippi Valley Spiritualists Camp Meeting at Clinton, Iowa. There he met and conversed with spiritualists of all grades from cheapest to best, from fakes to frauds.

After father's passing, we had occasion to ask Will Kellogg if he had ever seen or known of any genuine return of former spirits of people who had once lived. His answer was, "No; after forty years I am convinced there is no such thing."

We recall vividly, even now, one Sunday at Clinton when father met A. T. Still on the Camp Grounds. They got into a heated

argument as to respective merits of whether "the rule of the artery is supreme" (Still), or "nerve impulses are the primal mover of all function" (Palmer). We were present on that occasion. They were sitting on the lawn. They attracted quite a gathering because by this time both characters were well known.

While at Letts, father studied phrenology and lectured on the subject. I have one photo of a stage setting with him on it, with charts, etc. Reminds us of our subsequent days when we traveled with trunks, much equipment, charts, models, to portray what we meant.

From Letts, father moved to Burlington, Iowa. Why he moved there is unknown to us now. Whether he moved there deliberately to change vocation, or whether he was tired of teaching school, we do not know.

In Burlington, he met Paul Caster, internationally known magnetic healer. Years later, we recall one vivid impression which visiting Dr. Caster had on our mind, young as it was. His walls were covered with crutches, canes, braces, etc.

Paul Caster's son, Charles Caster, is now one of our finest Chiropractors and has been practicing Chiropractic in Burlington for many years.

Paul Caster, as a magnetic healer, rubbed and slapped entire body on the theory he was imparting or transferring personal magnetism or strength into body of sick person. D. D. Palmer became a student of Paul Caster. He rented an office in a downtown building and had "Dr. Palmer" painted on a glass door. He went out to lunch, and when he came back and saw that name on the door, it brought back the prophesy of the spiritualist.

D. D. moved to Davenport in 1885, when we were but four years old. Here he met Villa Thomas, a niece of General Thomas of Civil War fame at battle of Nashville. Some time later, all three of us visited the battle field of Nashville, and there met an old Negro who fought under General Thomas. He showed us over the battlefield. He stated he was a prisoner of war in a prison when Abraham Lincoln called to visit the prison. Mr. Lincoln told this colored man: "This is the first prison I have ever been in," to which the colored man replied: "I have been in all the rest."

Villa Thomas was a paralytic in lower limbs. She crawled up stairs on hands and knees to visit father to take treatments. When she regained ability to walk, father married her. This was his

fourth wife. You ask what became of the third wife. This is a blank in our family history.

Father rented two back rooms on second floor of Ryan Block. In front, were Bollinger & Maines law offices. They had many an argument regarding legality of his practice.

D. D., being an original and independent thinker, having no preconceived set opinions on healing arts, figured out a different way of treating sick — a way he considered more practical. It was different from Paul Caster's method.

Instead of treating ENTIRE body, rubbing and slapping ALL over, he reasoned, "Why treat entire body when only ONE organ is sick — liver, spleen, stomach, heart, lungs, etc.? It would be better to throw all magnetic strength into that ONE organ." To that end, he had patient lie prone on back on a comfortable, easy couch. D. D. placed one hand OVER sick organ, other hand UNDER back UNDER that organ. Holding both hands still, he would pour his magnetism from positive right hand TO negative left hand. He gave fifteen-minute treatments. He began treating at 8:00 a.m., took one hour for lunch, always took a noon siesta to replenish his body before beginning treatments at 2:00 in afternoon. He used to get furious and go into a rage if anybody dared waken him during this sleep. Only justification for waking him was "fire or death."

Questions arose in his mind, such as:

Why was ONE organ sick and rest of body well?

Was this one organ weak? Is so, why?

Was it because ONE organ was not getting its normal strength? If so, why was it not getting it?

Was it because of lack of nerve supply? If so, why?

He reasoned there was a reserve supply in the body but not in one sick organ. If so, why wasn't it getting FROM brain TO body?

Somewhere BETWEEN brain AND body there was a damming backward with a starving supply forward. If so, why; where was it?

Eventually he reasoned out vertebral subluxation.

All seems simple *now*. Then, it was carving out a virgin forest. It came slowly, bit by bit, year after year. He was five years covering ground we cover here in one paragraph — 1890 to 1895. In 1895, he had it named "Chiropractic" by Rev. Samuel H. Weed, a Greek scholar and patient of D. D. Palmer at the time. The "Weed" family were all over six feet tall, as straight as weeds. This included mother, sons, and daughters.

Here was a NEW principle with a NEW practice attaining a NEW result. It was then he began to figure HOW to "treat" the vertebral subluxation.

Problem of sickness and correction of its vertebral subluxation cause was SO SIMPLE he was afraid the world would see thru it and steal it from him. In his two "treating rooms" he had large mirrors on walls. His tables were so placed if a patient's face was turned to that wall, patient could see what he did, way he did it. He caught one observant patient doing that one day, who had the temerity to discuss it afterwards with D. D. He went into rooms and took down mirrors, never to replace them. (See p. 142, THE BIGNESS OF THE FELLOW WITHIN, Vol. XXII, Palmer, 1949.)

Slowly but consistently his business grew. He moved up to top floor of Ryan Block. Gradually he kept taking over more rooms until eventually he had entire floor of forty-two rooms, paying \$175 a month rent. His fee for each treatment was \$1 cash, in hand paid at the time. He kept books. We have them in our museum. His income would range from \$30 to \$50 per day.

Knowing full well what he discovered, knowing its value to sick mankind, made him domineering, boastful, bragging. He became dominant in manner. He talked, ate, dreamed, drank it to everybody all the time until he became a bore to all with whom he talked, on the street, in his offices, anywhere, any time, to everybody.

Altho he stepped UP professional value, he stepped DOWN personal value to those with whom he associated. Eventually business dropped. Instead of taking transition from magnetic healing to Chiropractic calmly and coolly, he became overbearing in attitude, more particularly to those who couldn't and wouldn't understand simplicity of his new idea. He became cross and irritable, condemning people.

Gradually business began to drop. He ran into debt. He got behind in rent for six months at \$175 per month. He borrowed money from business associates, patients, until he was behind over \$8,000.

Meanwhile, in 1890, we were nine years old. In 1895 we were fourteen years old. Father used to gather patients around him in his office, in evenings, and talk his ideas to them. They would agree or disagree. Meetings sometimes would be pleasant, other times disagreeable when D. D. would become cross and crabid. All this time we would sit and listen, gathering all we could, making

notes in note books. (These are now in our museum showcase.) This is how we came into the picture professionally.

Harvey Lillard was our Negro janitor. He was deaf, and had been for seventeen years. Father asked how it happened. He said he was in a stooped, cramped position when "something popped in my neck and I went deaf immediately." Father examined the neck, found one of those prominent bumps sticking out. Father reasoned, "If PROduction of that bump CAUSED deafness, then its REDuction would RESTORE hearing." He pushed this bump three times on three successive days, and hearing WAS restored. We saw him "treat" Harvey Lillard. We KNOW it was IN THE NECK — not fourth dorsal as he wrote in his book.

Why did he "treat" Harvey's deafness IN THE NECK and SAY it was at fourth dorsal? Answer is simple. Medical men said and emphasized it was dangerous to do anything IN THE NECK. To move those vertebrae was to cause fracture or dislocation and cause complete paralysis or immediate death by crushing spinal cord. Father absorbed this fear, notwithstanding evidence of having restored Harvey's hearing. Rather than have his students "treat" the neck and kill people, and kill off his Chiropractic idea, he shied all work away from neck and down lower on back where it was safer. He taught earlier students to keep away from neck.

His book was written in 1910 — fifteen years after he named Chiropractic. By this time he had learned it was not dangerous. Only explanation we can give for this discrepancy in location of Lillard's case was that his book of 1910 was a compilation of various writings for various years between 1895 and 1910, and rather than to correct them he thought it better to let it rest and not raise the question further.

Father despaired of ever getting bigness of simplicity of his principle and practice over to great mass of people. He believed they had been so steeped in medicine that they could not get away from it in any, many, or all ways. To this end he decided to keep Chiropractic a family secret — from him to us, from us to our son, and hand it down as a family tradition much like Bonesetter Reese did to his daughter, and as others have done with their formulas, etc. (See p. 619, THE BIGNESS OF THE FELLOW WITHIN, Vol. XXII, Palmer, 1949.)

We reasoned if Chiropractic was what he said it was, it would do what he was proving it did in a percentage of cases, then no one man could adjust ALL vertebral subluxations in the world. If Chiropractic was as applicable as we believed, it was a health

service needed to all and would be demanded by all when it proved its case and ability to get them well.

We decided to give it to the world. This created a great split between father and son which was never reconciled, even unto his death in 1913 when he made his wife promise to not permit us to attend his funeral.

Peace was later made between his widow and us. She later presented many of father's closest personal things which we have in our museum show case.

Since advent of the G-P-C movement into our rank and file, question frequently arises as to whether this movement is or is not or should be a religious desire. Careful study of the G-P-C bulletins presents a divided opinion. Frequent references to God, prayer, and Him, crop up in its language.

Let us quote a few from the G-P-C Bulletin No. 40, January, 1950:
"The most difficult thing man is called upon to do is to 'lean on the Lord' and let His will be done."

"With due respect and humility give the Law (or God) that makes all things possible,****."

"Man is the instrument, servant, connecting link, of CHRIST, between the God-head*****."

"*****as was true of the master, teacher, JESUS, who*****."

"Man of today, as JESUS of long ago*****."

"***everything they do to God's will and God's purpose."

"Anything that we are as Servers of the Almighty God can only be by His Almighty grace."

"Still through it all, God took care of them."

"And yet God, as a loving and just God, ****."

"***with God going before us, let us get across the river Jordan into the milk and honey which awaits us there."

Many quotations of like character could be made. These are such as any Christian religious enthusiast would speak.

That there IS a Law of the Universe, is obvious. That it IS personified in man, in Innate Intelligence, is obvious. That a violation of the Unital Law means sickness, is obvious. That a correction of intermediate cause between Law and Expression will restore health, is obvious. To call this Law "God" is indicative of Christian interpretation of religion. There is Jehovah of Jews, Mohammed of Mohammedans, Buddha of Buddhists, Karma, Confucius,

Hindus of India, Moslems of Bali, Phallic Worshipers of Bushmen of Australia, and Maori's of New Zealand, Great Spirit of our American Indians, etc., all of which are also religions.

Law of the Chiropractor IS SAME LAW to ALL religions. A vertebral subluxation in a Jew, Mohammedan, Buddhist, Confucianist, is SAME violation of one UNIVERSAL law to ALL mankind, regardless of what he interprets educationally as right road to heaven or royal road to hell. Chiropractor DOES recognize a Universal Law, universal to ALL people regardless of whether he believes in voodoo, is savage, lives in jungle or city. There is no one CHRISTIAN GOD for all mankind, regardless. I find no fault in G-P-C movement adhering closely to advocacy of THE Law, but I find it taking on aspect of a CHRISTIAN GOD, thus excluding broad principle that Chiropractic principle and practice applies with equal force to ALL people of world, regardless of sect, creed, country, or color.

From general comments, general observations, general statements made in G-P-C publications, it appears it is being narrowed by the constricting that that Christian-chiropractors are to be G-P-C Chiropractic missionaries to the non-Christian-sick rather than to all humanity everywhere regardless of religious beliefs.

The "heathen" disbeliever in our Christian Christ or God has same subluxations, same sicknesses, and needs same adjustment as Christian who believes in and has "faith" in Christ. There is no Christian subluxation, Moslem occlusion, Hindu pressure, Christian Science interference, Greek Orthodox resistance to nerve force energy flow, and/or Buddhist adjustment, any more than there could be a D. D. Palmer spiritualistic religion restoration to health.

More peculiar to Christianity than any other is exportation of its beliefs into foreign countries and refusal to permit importation of other religions into this. We hope our G-P-C friends do not construe that a Russian who believes in no religion must become a Christian before he can have a Christian subluxation to secure a Christian adjustment. Why is it Christians take attitude that all backbones must be Christian backbones to secure CHIROPRACTIC adjustment? Strength of D. D. Palmer's Chiropractic is that it disregards narrow and conceited opinions of religious educations. Chiropractic is broad enough to accept that backbones have no creed, subluxations have no sect, adjustments have no denomination; Innate is a broad, all-universal law, irrespective of narrowed religious opinions to contrary.

All any Chiropractor needs is to convert any, every and all religious people, regardless of creed, sect, or denomination, to CHI-

CHIROPRACTIC principle and practice of vertebral subluxation cause and vertebral adjustment restoration. From then on it's up to Innate in each individual "to wash his soul and body of all 'sin'."

D. D. Palmer followed no sect, creed, or denomination. If he leaned to any, it was to principle of spiritualism, and then only to its religious aspect. Did he ever intend to make a religion out of Chiropractic? That depends upon what constitutes a religion. If, by "religion" is meant setting up one particular savior of souls of mankind, such as Christ, then this was not his idea of his service to sick mankind. If, by religion, is meant establishment of a church, of a one-day-of-the-week Sunday, with a ritual of hymns, sermons, robes, preachers, etc., this also was repugnant to his concept of universality of Chiropractic vertebral subluxation and its adjustment. If, by religion, is meant that sins, souls, saviors, to save them, need be established, then that was revolting to his idea that anybody anywhere could get sick and get well whether sick person believed in any, all, or none of them.

After the "devil" began to get in his work of destroying broad aspect of D.D.'s principle and practice, he often expressed wish that he had established it as a religion. Emmanuel Movement failed to accomplish its objective. Christ failed to follow thru with "laying on of hands." Mormon church followed Christ's example in its early years. It has now gone the way of all flesh. Medical men control its destinies with medicines and surgery, and "laying on of hands" is lost in their modern practices. About only "religion" which has maintained its individual identity, without back-sliding, is Christian Science.

"Devil" is a bad word. Cut off "d" and you have "evil." Cut off "e" and you have "vil" (vile). Cut off "v" and you have "il" (ill). Cut off "i" and you have "l" (hell). Who is the devil whom D.D. recognized early in his day? It's the man who could not see THE BROAD APPLICATION; on contrary, narrowed it to some constricted and restricted application to those who prescribed a certain limited creed, whether it be medicine, surgery, Christianity, or what have you.

When D. D. saw statutes creeping up on our blind side, cramping our understanding and knowledge, dwarfing our abilities to apply it without molestation; when he saw the Law being forced out and treatments substituted, he often said he wished he had made a religion out of Chiropractic.

What kind of a religion would he have established? We are convinced it would have been like the Bahai Movement where ALL men are equal. He would have set no creed, sect, denomination,

church, preacher. He would have established TEACHERS OF A KNOWLEDGE OF LAW AND ITS APPLICATION TO SICK MAN.

Unless G-P-C movement watches itself, it, too, will back-slide into Christian religion, only to protect itself against encroachments of the devil. We find no fault with G-P-C movement if it keeps its literature on broad principles and will not let its fanatical followers constrict it to one certain kind of "religion" applicable to only one particular group of people who believe in that one certain kind of a Messiah.

Day after day, week after week, month after month, we listened to D. D. propound ideas. We drank them in, hungrily. In time, they percolated and we became saturated with their value. In time, we "found ourself", all of which has been written in various of our publications.

In 1902, D. D. Palmer issued us a diploma signed by himself, his wife, and ourself.

We practiced Chiropractic since we were seventeen, calling ourself "Doctor". That was the why and wherefore of mustache and beard—to appear older than our years. We thot we could disguise youth because sick people did not want to go to a boy with a new idea they knew nothing about.

We practiced in those early years in Lake City, Iowa; Traverse City and Manistique, Michigan; Elkins, Belington, and Kernes, West Virginia, etc. We mention this here because it has a direct bearing on the character and life of D. D. Palmer, later.

D. D. Palmer believed implicitly in his Chiropractic principle and practice. He was a rabid disbeliever in medicine, medical practices, as having value in getting sick people well. To that end, he always wrote vehemently against any medical principle or practice. He wrote as pungently for the Chiropractic idea. His book is full of such consistencies and inconsistencies.

To offset this, some Chiropractors today try to pervert his writings by maliciously denying what he believed by quoting isolated sentences. D. D. Palmer did write the following quotation as a part of an extended article, on page 541 of THE CHIROPRACTOR'S ADJUSTER. It is manifestly unfair and unjust to D.D. for any person to take *one* sentence or paragraph and construe it as an all-inclusive or all-exclusive statement to the opposite of what the entire article or what his entire book laid down as a broad

system to be used. Sterling Cooley has seen fit to do this in his mimeographed letter sent out under the title "WHY SHOULD THE KETTLE CALL THE POT BLACK." We feel a direct explanation in contradiction FROM ONE WHO KNOWS should be inserted here.

The quotation Dr. Cooley issues is as follows:

"Chiropractic is defined as being the science of adjusting by hand any or all luxations of the 300 articular joints of the human body, MORE ESPECIALLY THE 52 ARTICULATIONS OF THE SPINAL COLUMN, for the purpose of freeing any or all impinged nerves which cause deranged functions. NINETY-FIVE PER CENT OF THESE ARE CAUSED BY VERTEBRAL LUXATIONS WHICH IMPINGE NERVES.

"The displacement of any bone may impinge, press against nerves, and thereby modify the amount of force used to propel an impulse, functions are performed in too great a degree."

Father NEVER "adjusted" or even tried to set or replace any other articulation in the body except vertebral articulations AND toe joints. He knew that people stubbed toes in dark at night, hitting them against furniture, etc. This "subluxated" these articulations, threw them out of alignment, creating a right angle, throwing angle against tight leather shoe. In walking, this caused it to rub against shoe, producing a callous growth which grew thicker as time went on, which DID cause pressure on nerves between external tight leather which did not give, and bone inside which was hard, thus causing "pressure" which he describes in language quoted above as "The displacement of any bone MAY impinge, press against nerves." This induced pain as in corns and bunions. D.D. makes clear distinction between "ninety-five per cent of these are caused by vertebral luxations which impinge nerves" AND other five per cent which were caused by toe-joint luxations causing corns and bunions.

Why did he not make this distinction clear, and differentiate that other five per cent were toe joints? I do not know. If one will read his book carefully, compare this statement with many others, especially where he condemns use of other methods on other joints of body, one will realize he DID NOT advocate, believe in, or attempt to "adjust" shoulders, elbows, wrists, fingers, clavicles, sternum, ribs, pelvis, innominates, hips, knees, ankles. Toe joints? Yes!

In early days he DID "adjust" vertebral subluxations AND toe joint "subluxations" for corns and bunions. Because of fixed understanding in minds of public of meaning of "chiropody" pertaining to corns and bunions, and their misunderstanding and misapplication of NEW word "Chiropractic", they soon began to

think "Chiropractic" was the same as "Chiropody" and Chiropractors were soon known as "corn doctors." It was a natural confusion to apply one old word to new one. In D.D.'s mind, CHIROPRACTIC was important, not CHIROPODY. When he became convinced one was submerging other, he quit adjusting toe joints. It was about 1910 when he quit adjusting toe joints entirely and confined himself to vertebral subluxations. He should have made this clear in his book before he published it. Book of 1910 was a compilation of writings written years previous to 1910; many were a carry-over and this idea was one of them.

The NCA, without knowing these facts, has seen fit to deliberately and maliciously construe him to mean, by above quotation, that he did adjust ALL articulations of all other parts of the body — attempting to prove D. D. was an over-all general Chiropractic treater of entire body, which never was true.

It was while we were practicing at Manistique, Michigan, we were making more money than father was in Davenport. We made a report to him of our income. We received a wire, "Come home at once." Being a minor, we obeyed.

When we arrived, we found father had sold everything he could to a second-hand dealer. What he couldn't sell, he turned over to us with instructions, "When you get \$200 together come to California where we are going." That night, he and his wife skipped to California. This made our landlord bitter, and he threatened to bring him back and send him to jail for jumping a landlord's lease.

Using different business methods, given time, we rebuilt the business, made it pay, paid off all father's debts. When this became known, he returned. We gave him half of what we had. Again he ruined everything and left us high and dry with a defunct business. This happened three times. Fourth time, we had enough and refused to take him in.

In 1913, the so-called "accident" occurred. It is printed in extensive detail as WITH MALICE AFORETHOUGHT in THE BIGNESS OF THE FELLOW WITHIN, Vol. XXII, Palmer, 1949.

Following this experience, father moved to Medford, Oklahoma where he opened a grocery store. His brother Tom ran a newspaper there. This lasted but a short while. He then went back to Chiropractic in a school with Alva Gregory, M.D., known as THE PALMER-GREGORY CHIROPRACTIC SCHOOL. This partnership did not last because nobody could work with father. Less could be said for Dr. Gregory.

From there, father moved to Portland, Oregon. It was while he was there he gathered together many of his writings, many of them years old and not up-to-date with his thoughts and ideas, into book we have mentioned.

He then moved to Los Angeles where he had an apartment which he called a school. In none of these starts-and-stops did he ever have many students. This was his last stopping place, as he passed away in 1913, of typhoid fever.

His early life was professionally a success, even tho his personal life was mostly turmoil and strife. His later life was professionally a failure, even tho his personal life was pleasant, for he finally married his first love — Molly Hudler. This was his sixth experience with wives. Molly was a likeable character and one he wooed while at Letts, but some other fellow beat him to getting her. He died, and father again met and married Molly.

His life was full of inconsistencies, contradictions, ups-and-downs, tragedies, heartaches, loneliness, accomplishments, failures, domestic troubles; but he did one thing that will bring his name thru history and bring him fame thru the ages, which no other man had ever done — he discovered THE cause of dis-ease and found a method of correcting same, by hand only.

Various circumstances occurred which shaped all our lives, for better or for worse.

When each of our sisters reached eighteen, they were driven out of home and onto the streets of Davenport to make their living any way they could.

We were forced to sleep in drygoods boxes in alleys, often when temperature was below zero.

All three of us got beatings with straps until we carried welts, for which father was often arrested and spent nights in jail.

Our older sister was badly injured and has been sickly all her life. Our younger sister had a severe abscess caused by beatings. We have a fractured vertebra and a bad curvature from same source.

None of this was because D.D. was naturally cruel or inhuman. He had a wife at that time (Villa Thomas) who was a dope fiend. She was a devil when without dope, and an angel when she had it. In those days, dope was easy to get. She took it because of pain when she had her longstanding paralysis. To get rid of her scold-

ings against us, father would do what she told him to do. Father was so deeply involved and so busy with thinking and writings on Chiropractic, he hardly knew he had any children.

Between our dissipated uselessness (see The Story Of Herbert L. Flint, in this book), and father's wife's cussedness, we made a good team for brutality which possibly deservedly came our way. Retrospection has peculiar quirps which we considered unjust and unmerited in those days.

D. D. Palmer had many "peculiarities" which he could not explain, which we cannot explain now.

If he was in close proximity of a person in pain, regardless of where in body of patient, regardless of whether excruciating or dull, D.D. would get same kind and degree of pain in same place. I have seen him double up with a sudden attack of some kind. If he told other person about it, it would leave him (D.D.). If he did NOT tell other person, pain would linger until D.D. did tell him. Was this telepathy? Not as we know and use the term. Was this "sympathy" between patient and doctor? Was it similar to prospective father who has "morning sickness" same as prospective mother? Who knows? We have never had a similar experience reported by anyone else.

Altho but a kid, we worked in packing room of H. A. St. Onge department store, downstairs. We pulled nails opening packing cases. Invariably, nails were crooked and bent. D.D. had us save all crooked and twisted nails, bring them home. He had a piece of streetcar rail on which we had to straighten out these nails, sort them as to size, in cigar boxes. This was his way of teaching us to economize and make use of things others threw away. This idea later became a factor in building A LITTLE BIT O' HEAVEN (see story in Vol. XXII). We still have that bit of rail in our museum.

Mail was delivered then from Post Office to offices and stores, same as now. Father was an early riser. We have known him at various times to go direct to General Delivery window and say: "There is a letter here for me from O.G.W. Adams, Dubuque, Iowa. It was mailed yesterday. It has your postmark as of 3:00 p.m. yesterday afternoon. Please get it for me." Getting letter, we have seen him hold it flat on his forehead, sealed and unopened, and start reading, and finish by reading entire letter EXACTLY as written, including signature, misspelled words, if any, underlined words, if any. He would then hand letter back, sealed, to man at window, ask HIM to open it and verify accuracy of his reading.

Father was ALWAYS 100 per cent accurate. How was this done? Who knows! Did he know such a letter would be sent on that day, from that person, at that time? Could he know this, from strangers writing him for first time, wanting to come to him for magnetic treatments? From about 1895, he discontinued doing this because it was in contradiction to new Chiropractic line of reasoning he was propounding from then on.

Father was a spiritualist as a religion, not as a return of spirits of departed, which gathered around a seance table at \$1 per, who retained thru some "control" thru a "medium." Let us interject. Father belonged to no church, creed, or denomination. He was a profound skeptic. Spiritualism came as near as any to supporting what he believed. We know he wrote about one "Jim Atkinson" who he claimed gave him his early ideas about Chiropractic. He says he got much information re Chiropractic thru Jim Atkinson, etc. I do know that there was a fundamental change in father's thinking which took place between 1890-1900 — a period of ten years. As we look back now and review his unpublished writings, we can see where he was "getting ideas" from a source which he could not analyze. Being a spiritualist, he gave credit for them coming from some person who formerly existed, who some spiritualist told him was a "Jim Atkinson." Knowing no different, he accepted that as his source. Later, he saw a different light. He eventually came forth with the clean-cut understanding of Innate Intelligence within him. When that permeated his thinking, he ceased to credit "Jim Atkinson" with anything, and credited it all to THE BIGNESS OF THE FELLOW WITHIN himself.

You ask: Then why did he write about "Jim Atkinson" in his book published in 1910? There was a strong seeking for some unknown source of information coming to him in some unexplainable manner. There was a strain of the mysterious unknown in father's early thinking. He liked, in those days, to mystify listeners with weird tales which we are now convinced was his method of trying to formulate and correlate his new form of thinking, getting away from magnetic healing into the Chiropractic principle. He found himself in doubt as to accuracy of old, which he was rapidly doubting. He found himself in a quandary as to correctness of the new philosophy he was formulating. Any reason for that statement is that while he wrote about "Jim Atkinson" in his book printed in 1910, he in all later years never referred to such, did not recite those weird tales. Notwithstanding this, he usually attended the Mississippi Valley Spiritualists Camp Meeting at Clinton, Iowa, in August and September every year, especially on Sundays. He frequently denied

their doing what they claimed they could, by way of returning spirits.

Will and Mary Kellogg, his early and old-time friends of New Boston, Illinois, when he had "Sweet Home", were officers of these camps in various capacities, from president down to grounds superintendent, for forty successive years. We have heard father discuss "manifestations", "phenomena", and "materializations" many times. We heard Will Kellogg tell father once, "I have never seen ONE honest example of reality or any such demonstration in our forty years' association with the best of them in this country and Canada." We never heard father recite one such instance, either. We are convinced he was completely disillusioned in later years of "Jim Atkinson" he wrote about in his book.

For a long time, under the magnetic regime, father sent all patients across the street to eat. \$3 a week bought twenty-one meals. Because food was inferior, and oftentimes in winter unpleasant for sick folks to get out, he eventually established a kitchen and dining room on top floor, where he had offices and bedrooms. Due to meanness of his wife, father had a private table where they ate. All rest ate at two long tables, boarding-house style. Everything was put on table in heaping dishes which were passed around. Because of some quirk, Sunday night was oyster soup night. We were sent to get oysters and big baskets of oyster crackers. We children were never permitted to eat at table with father and his wife. We had to eat in kitchen with colored cooks and waiters. They always sat down at table; we kids had to stand up to eat. They were permitted all pie, cake, puddings, and ice-cream they wanted; we were never permitted to have such. After everybody else had gone to bed, we kids used to sneak in kitchen and rob icebox. When colored help reported this to father's wife, she padlocked ice-box.

When very young, we were sent to John Eagle's grocery store to get a basket of eggs. Across the street was a long iron grating over areaway of Western Union building. It was worn smooth from people walking on it. On this particular day, it snowed heavily and we slid over this grating, leaving a telltale path where our feet skidded. On our way back from grocery store, we skidded again, fell down, basket of eggs hitting grating and smashing most of ten dozen eggs. Yolks began running, and left a telltale streak from there, across street, up stairs, into kitchen. Cook immediately reported the incident to father. He asked "how come." We told him that was the way grocer gave them to us. Father took us by the hand and said, "We will go and report this to John Eagle." Here we were again, carrying the basket of broken eggs BACK to grocery

store. Arriving, father reported what we told him. Of course, John Eagle reported he had done no such thing. Returning, father called our attention to golden streak of egg yolks from sliding place to kitchen, asking "how come". We played ignorance. Then was when we got one of the worst beatings of our life because we lied about how eggs became broken. Our simple mind didn't have ability to realize the golden trail was a dead giveaway.

In alley behind our building was a rain barrel full of water. Kid-like, we floated matches on water on top of barrel, blowing them, making believe they were ships. In so doing, we got entire front of our shirt wet. Returning home, father asked "how come". We reported we had fallen in the river. Next question was, "If that is so, why aren't your clothes wet all over?" For this lie we got another beating. Why can't simple minds of boys realize the obvious IS obvious? Is it because of lack of realities of things?

Father had an infirmary of forty-two rooms. Some patients were bed-fast. Outside of us three children, he made no provision for maid or nurse service. We three made beds, emptied potties, scrubbed floors, and otherwise kept all in as good shape as we could, before school or working hours, at noon between classes or work, and in evenings. Patients had to get up in time to let us do all this before morning school hours.

We remember one time sister Jessie forgot to empty one under-bed pottie. Father went to High School, marched boldly into study classroom with more than 400 students, asked teacher's permission to address class, and said, in a fearless voice: "I want my daughter Jessie to come home and empty the chamber in one bedroom she forgot this morning." With this, he stomped out as big as you please, thinking he had properly reprimanded his daughter for an act of carelessness. He was proud of his act. Can you imagine embarrassment and humiliation this meant to our sister? Can you imagine how every one of those 400 kids told that tale around supper tables that night, to their parents? Can you imagine what those people thot of our father after that? Can you imagine how that lowered him in their estimation and became but another tale for them to pass down thru years against him?

As we stated, no provisions were made for nurse service for bed-ridden cases. One case, one day, had a BM in bed. She lay that way from morning to mid-afternoon. Being the wife of a prominent Iowa Mason, the husband wrote and asked another prominent Davenport Mason to visit his wife and cheer her on the road to recovery. Upon arrival, she told him the condition her bed was in.

In fact, he could smell it. He left, disgusted. For years, our friends — few as they were — tried to have us voted into the Blue Lodge of Masons. We were repeatedly black-balled. We laid most of it to antipathy of medical men. Years later, we found out the important reason why. This Davenport Mason held against us the shortcomings of father, repeatedly telling the story, thinking we were of the same unhygienic caliber. (We held and still hold, as far as we know, the record for being black-balled in the Masonic Order in Davenport — 18 times in 12 years. We are glad to report now all that is COMPLETELY changed. We doubt if few people stand higher in the regards of Masonic Fraternity in all branches, than we do now.)

After each meal, D. D. would take a bit of bread and roll it between his fingers, as tho he were rolling a pill. He would continue to roll this for some time, occasionally taking it away from table with him, continuing to roll it. Why? Who knows? It was one of his foibles. It was a consistent habit that he kept up for years. It was always about the size of a fresh pea.

After father began boarding patients on top floor of the Ryan Block, he had a very much mixed food menu. He did not believe in diet for any case. He supplied meats, fruits, breads, vegetables, and let each patient eat anything he wanted. His motto was "Eat anything you want, as long as it tastes good, stopping short of being satisfied." Father was consistent in his staunch understanding that Innate knew better than any educated person what was needed for the body.

One who studies his writings, especially his book issued in 1910, will be convinced that D. D. had strong convictions against using anything but Chiropractic adjustment. In this book he frequently took to task people who advocated other principles and practices in direct contradiction to his convictions that Chiropractic *alone* was sufficient. It is a travesty to his thinking, to think the NCA republished his book for money greed they could get out of it. He was the straightest of the straight. They are the most vicarious group in our ranks. To have mixers publish a straight book for profit, would have aroused his ire to highest degree.

At one time we sang in choir at Episcopal Church. For such occasions, we had a special Sunday suit. Father and his wife often drove to Linwood, Iowa, ten miles down the river, to spend Sundays with the Dutcher family on their farm. If all was sweet and serene with his wife, she would hand out our suit. If she was without dope, she would hide it. We knew where she hid it. We would

wait until they were gone, place a plank across skylight from one window to another, crawl over, open window, and get suit from under mattress in their bedroom. If we had fallen, it would have been down three floors, about thirty-five feet. We would get suit, put it on, sing in choir, come back, take it off, crawl back and hide it again, and she never knew the difference.

Father was a perfect Spencerian penman. He wrote ideas in longhand. Would write and rewrite them, much as we do today in these articles. He would discard earlier copies by throwing them in waste basket. He never tore them up. Even as a youngster, from 1890 on — at nine years of age — we used to go each night and gather these writings. We saved them. We have them today in our scrapbook. (See The Story of a S.B., in THE BIGNESS OF THE FELLOW WITHIN, Vol. XXII, Palmer, 1949.)

Father was a hobbyist. He enjoyed collecting things different than anybody else.

At one time he had a matched pair of Indian ponies. They weighed one thousand pounds each. He drove them to a phaeton with small wheels. They were marked exactly alike and were full brothers. Many a time I have know them to pull that buggy with four people across Government bridge, with traces dangling, pulling load by lines in their mouths. One of our duties was to curry the ponies, wash them to get urine stains off their white legs, drive them to the Ryan Block where father would take over. They ran away several times, but nobody was injured outside of being scared.

Getting tired of ponies, he purchased a tandem bicycle on which he and his wife used to ride around the city. He considered this good advertising.

At one time, father gathered a collection of buttons. There were no two alike — horn, metal, pearl, cloth; in fact, all kinds, so long as it was a button. Some large, others small; some hundreds of years old, others right up to the minute in style and time. There were more than 50,000 different kinds. I often wondered what became of them. Lost in some of many shuffles in those early days.

Father was a buyer and seller of gold fish. He bought them by thousands. He took Room 52, which was our bedroom, moved us into another, and converted it into a big aquarium. He made two big cypress wood tanks, twelve feet long, six feet wide, and one foot deep. One was on top of other. He bought small fish from breeders in Iowa, Indiana, and Maryland. Being an original

and independent thinker, he changed shipping of fish industry in one respect, which is followed today.

In those days, shippers of live fish used deep milk cans in belief that fish needed MUCH water. Father suggested that live fish needed oxygen, more SURFACE water. He drew up a design for a type of low, flat shipping can. He increased water surface by three times, and reduced quantity of water by two-thirds. This cut down express charges materially, made it possible to ship twice as many fish, with less fish dying enroute. This type of can is in use today. In Room 52, called the "Fish Room," we had dip nets, glass bowls of various sizes, fish food for sale. We were in charge.

Each morning we used to go downstairs, on sidewalk in front of entrance to our building, and there, in colored chalks, work out signs and designs. One which we used a great deal was: "TWO gold fish for five cents APIECE." People would come up and ask for "two gold fish for five cents." When we explained they were five cents APIECE, sometimes they would get mad, call us a liar, and we would have to take them downstairs and prove to them it was five cents APIECE.

Perhaps that is where we got the idea of having aquaria in our Clinic today. Fish are one of the most interesting forms of life people can study. People go into "Rehab Lab" in our Clinic and sit by the hour studying antics of fish of various kinds.

At one time father scoured the world and gathered together the finest and largest collection of animal game heads and antlers in the world. To attempt to enumerate and describe even a portion would be to pull back on memory which soon forgets accurate detail. He wrote and had printed a newspaper called "The Chiropractic Educator." Borchert Printing Company printed them. The plant was three blocks away, upstairs. It was our job to take our little tin wagon, go to the plant, carry them downstairs, onto the little wagon, and bring them home. We three kids had to fold them after school, and mail them to prospective patients. On front page he would have one picture of some certain head, changing it from time to time, with proper description to attract attention.

These heads, horns, and antlers were all over the walls in his reception room, office, and up and down the open hallway outside. It was our job to dust them every Saturday morning. We came to know animals well.

There was a Sicilian steer with horns ten feet, eleven inches long — next to longest in world. Longest was one inch longer. Heads from over the world — always the longest, finest, choicest money could buy.

Father finally had heads crated, taking them to Washington, where they were on exhibit at Julius Warmbath's establishment. Father's intention was to sell them to the Smithsonian Museum. He found, though, they did not BUY anything but would TAKE if GIVEN free of encumbrance. Father and we then talked to Clem Putnam, "angel" of the Davenport Academy of Sciences, who agreed to pay freight from Washington to Davenport if we donated collection to the Academy. We agreed, with one proviso — they would place a card on EACH specimen, acknowledging gift from Drs. D. D. and B. J. Palmer. This they agreed to do. The collection is now in basement of the Academy, gathering tons of dirt and dust, with nary a card on anything. Under terms of the gift, we could demand and secure return to us of EVERY specimen, if we so wished. This Academy and its custodians do not know or realize they have the world's finest collection. They are more interested in other tawdry insignificant trifles that have little value to the world of science.

We suggest, if you are in Davenport, you go to the Academy of Sciences, which is one block below The PSC on Brady Street, see collection in basement, and tell them of your disgust, of their ingratitude, and otherwise let them know you are ashamed of the way this institution disregards the donors. It MIGHT wake them out of their stupid lethargy.

Entire fourth floor of Ryan Block was just so many rooms. None had any wash basin, so we had to install crockery to substitute. There were but two toilets in very small cubby-holes in extreme rear of floor near alley, (so we substituted bed-potties). There wasn't a bathtub anywhere. When we took over later, we installed a bathtub and additional toilet in Room 46, near the front, which room was large and was a general catch-all carpenter shop, store room for groceries, mail boxes, packing room, etc. It was odd, to say the least, to direct people into such a junk shop to take a bath or go to toilet, but it was best we could do under the circumstances.

Father and mother were as different as any two distinct types could be. Father was a backwoodsman with gruff and stubborn English characteristics. Mother was a southern lady of culture and refinement. Mae (our older sister) was predominantly father, possessing many of his objectionable features. Jessie (our younger sister) was predominantly mother, with her sweetness, kindness, and thotfulness. Mae and we did not get along well. Jessie and we did. We were a cross-bred child, having many of father's good and bad qualities; many of mother's good qualities. Because of absence of a mother's love and care during our youth, and because of father's

presence all the while, with his objectionable wives, we naturally took on predominant objectionable qualities of father. After going thru questionable first twenty years, it did not take us long to realize if we wanted to succeed with people we had to train out father's destructive tendencies and train in mother's good qualities. Second twenty years were devoted to doing just that. We learned to discriminate between necessary qualities of father to develop, protect, and defend his Chiropractic, and to fight down his damnable methods which destroyed his effectiveness in dealing with people. We found ourselves often leaning to the sensitive and finer qualities of mother which we developed to their utmost. Any person can follow path of least resistance of his birth background; or he can follow path of hardest resistance and bring forth good in his parentage. This we learned to do, but it was no easy task.

D. D. Palmer had two "charms" — one for ague, one for toothache. There is something odd, peculiar, interesting, as well as mysterious about "charms."

D. D. always said he could "cure" chills of ague if one "bought" his charm. He charged \$5. We recall and remember various honest people who believed "charm" worked.

The "toothache charm" was a certain assemblage of poetic words, which D. D. wrote, sealed by gluing each fold, which person was to put away; which, if ever unsealed or opened, would lose its value. D. D. always said that if the magic of that assemblage of words was transmitted from man to man, both would lose its "charm"; but it could be transmitted from man to woman, and from woman to man, and it was still efficacious. His charge for each service was \$1, and unless he received the \$1, "charm" was no good. Writing the "charm," he would put his finger on teeth and mentally repeat the words before delivering written charm. Believe it or not, I know people still living whom we occasionally meet, who tell us about how "your father charmed my teeth and they have never ached from that day to this." We have yet to run into any person who said "charm" did NOT work. We know father charmed our teeth and we have never had toothache. At times, gums have been tender and sore, but they have never "ached."

Father used ague "charm" between 1880 and 1895. Toothache "charm" was used from 1880 to 1905. It is our opinion he discontinued their use because neither was consistent with Chiropractic reasoning.

Various "techniques" have been conceived and foisted upon our profession, for abating and aborting pain. One in particular is

in common use by a certain group. D. D. Palmer had the most practical of all. He used it beginning about 1895, till about 1910. His method was to find the tender or sensitive nerve *at its exit from the spinal column* (according to what we later developed as the inferior meric system); then, using one finger, would stridulate up and down, perpendicularly *across* the fiber until it was completely desensitized and numb to feeling. Obviously, he was doing manually what physicians do chemically with hypos, or what naturopaths do thermally or electrically, etc. It is easily seen D. D. was groping with various theories, trying to reach a sound basis for action. Let it be said to his credit, when Chiropractic reason and logic matured, he dropped pretenses in methods, realizing they defeated objective sought.

Father told many peculiar instances. The perfumed book sounded mysterious, and to this day we have not figured whether fiction or fact. This happened in Burlington, when he was practicing as a magnetic healer. He said he went out to lunch, locked doors. He returned — nobody having been in rooms. As he opened door, he smelled perfume. He trailed it back to an old trunk. He opened trunk and found odor came from a book in that trunk. He said nobody had been in rooms, had access to trunk or book. He replaced book in trunk, locked trunk. That evening, thinking issue thru, he went back to trunk, opened it, took out book, and all odor was gone. What significance had this to him? None! What was meaning or intention? None! He never knew how or why it was. He told the story without application.

Father had coal black hair. He wore it combed back, and so long it came down to his waist. It was so thick you could bunch it between your hands. At night, it was braided so it had a curly wave in the morning. (See photo in The BJP CC Museum show case.)

He wore a big Stetson cowboy hat, especially made. It was flat like the Mennonites wear, only much larger. (See his hat in the BJP CC Museum show case.)

He wore boots of soft leather. (See boots in the BJP CC Museum show case.)

D. D. Palmer did not smoke, chew, or swear. He occasionally had a glass of port wine after evening meal. He was not a drinking man.

He was short and fairly stout. His head was larger than most. He had high forehead, which indicates much to some people, nothing to others.

He was not an athlete in any sense. He did not exercise much.

He was a good eater, liked and ate all kinds of meats, vegetables, and fruits. He was not a gourmet and was not finicky about what he ate.

He was not affiliated with any church, sect, or creed. He had strong convictions against preachers and religions in general. He was convinced there was too much hypocrisy in all.

He played no common parlor games, such as checkers, cards, or dominoes. He considered them a waste of valuable time. He was not interested in boxing, baseball, football, basket ball, or other sports.

He was not a gambler, and never took a chance on games of chance. When people came to sell tickets on such, he gave them an abrupt shove-off.

His mind did not run to light things. He took life seriously and studied people seriously. He was a reader of "heavy" subjects and books.

He was unusually well-posted on topics of the day, and expressed strong opinions frankly, regardless of to whom he was talking.

He was uninhibited in thots, speech, and actions. (See story, THE UNHIBITED MAKE HISTORY, in THE BIGNESS OF THE FELLOW WITHIN, Vol. XXII, Palmer, 1949).

He wore no collar or necktie because long-flowing beard covered his throat in front and his long hair covered his neck in back. He was careless in dress, giving it little thot or attention. Often his white vest would be daubed with soup.

He was a very pleasant conversationalist, especially on subjects he knew, and with people he considered worthwhile, who had comprehension. He was abrupt in brush-off of people not worth while.

He formed strong convictions and expressed them freely.

In various ways, he was inconsistent. He was modest to extreme at times, very bold at others; unassuming to some, very assuming to others; not pretentious on some subjects, domineering on others; inclined to be shy and retiring to some people, very bold to others. He was not a pompous character except at times which seemed unwarranted.

At Portland, Oregon, October 8, 1949, as guest speaker at the Northwest Chiropractic Research Convention, we again renewed friendship with John E. La'Valley, D.C. He has practiced in Portland for forty-one years, and was associated with D. D. three years

in his school, when father was there in 1905-1907. At dinner, John told this story:

"D.D. said there was no necessity for anybody's getting seasick. 'Get an adjustment, and you won't.' I offered (said John) to pay the boat trip of D.D. and his wife from Portland to San Francisco, if they would go and not get sick; or, if they did, they would adjust each other and it would stop their seasickness. They accepted. They got as far as Eureka, California, got terribly sick—both of them so sick they couldn't adjust each other. They got off the boat and came back to Portland."

D. D. Palmer was not a religious man in the accepted interpretation of that term. He did not belong to any church, believed in no creed. We do not recall that he ever attended any service in any church anywhere. He used to attend the Clinton (Iowa) Mississippi Valley Spiritualists Camp Meeting, and possibly believed as much in that religion as any other.

What a pity that men who live crowded hours, days, weeks, months, and years find it impossible to remember the exact hour, day, week, month, or year certain things happened. However, events are clear.

While we three kids were attending grade school, it was one of our chores to fold printed testimonial newspapers father printed. The sheets were regular newsprint paper, newspaper-size sheets. They were printed at Borchard's Printing Plant on East Third Street, three blocks from Second and Brady Streets where father had his infirmary. Printing plant was on second floor.

It was our duty to go Saturdays, bundle up sheets, carry them downstairs, put them on our little tin wagon, haul them on sidewalks, up and down curbs. (See The Story of the Little Tin Wagon, Vol. XXII, Palmer, 1949.)

When we reached Second and Brady, Ryan Block, we put papers on elevator, took them upstairs. There, our two sisters and we would fold them, rubbing our thumbs to crease folds. Each sheet was folded six times. Now-a-days there are folding machines. Many is the time skin on thumbs was worn down to bleeding. Then we would tape them—and wear out tape. After folding anywhere from 1,000 to 2,000 in an evening, we would fold 2,000 to 3,000 on Saturdays. After folded, in upper right corner was a display ad selling gold fish. We had rubber stamp of a comet gold fish which we stamped with red ink.

The next week, we would address and stamp papers. After that, it was our job to sack them in U. S. mail sacks and haul them to Post Office.

History is a CORRECT statement of facts, regardless of whether it helps or hurts. It isn't a matter of honesty or truthfulness on part of historian; neither should he recite HIS opinions as to whether he likes or dislikes correct facts.

In writing these items re D. D. Palmer, we have checked back and forth in writings of others to see if we could add ideas to our collection. In that relation, we went back to our scrap book (See The Story of The SB, Vol. XXII, Palmer, 1949). In there, we found writings by C. Sterling Cooley, D.C. He wrote articles in March, 1937, March, 1938, March, 1939, March, 1940 — all being reprints from the NCA Journal. We would like to quote from them had they been correct statements of facts.

One example: Dr. Cooley denies D. D. Palmer was ever a fish peddler in What Cheer, Iowa. HE WAS! He bought fish from R. E. Barr, Davenport, who was a wholesale fish man. Many have been times father told about being called "Fish Palmer," and many times Mr. Barr told how he sold fish to father, expressing them on stub railroad line that ran north from Muscatine to What Cheer. This, and many other items, Dr. Cooley has denied for the sake of glorification of his subject. Glorification is a noble intent if true and truthful, but when correct facts are denied for its sake, then it does object of his writing an injustice.

We could cite many inaccuracies, but that is not the purpose of this story.

The Story Of IMPRESSIONS OF A VISITOR

"Lincoln Student Visits Palmer

"Chiropractic history begins with Palmer, and its geographic fountainhead is Davenport, Iowa.

"This fact, in itself, would have been of sufficient significance to inspire my pals, John Parascandola, George Gage, and myself to make the trip, even if we hadn't planned (hopefully) to inspect all the schools eventually.

"What will be reported here is only what memory, imperfect at best, has managed to retain. If your editor had directed the writer to describe his findings before the trip had been undertaken, an effort would have been made to buttress and pad the list of impressions which follow. Now that it's over, we'll do with those we have.

"Palmer commands a central location in this pleasant, good-sized town, and a definite place in the lives of its inhabitants. You may rest confident that gas station attendants far out on the city's approaches will direct you unhesitatingly to your goal.

"The group of buildings that make up the aggregate of Palmer stands on a friendly tree-lined street within a few blocks of the city's center. It is an imposing cluster, and initially its wireless masts emphasize its transmitting function more than anything else.

"We arrived about lunchtime, and as it was Saturday we were deprived the pleasure of filling up on the good, reasonably priced meal the school's students enjoy. Fortunately, all the other facilities were open to inspection and I believe we got a glimpse of most of them.

"It may be well to state here that Palmer's is more than just a school of Chiropractic. It incorporates a museum, school, outdoor and indoor exhibits of miscellanea garnered from many places, a park, a radio station, and two clinics (student and graduate) within its confines. It is a concretion of one man's tastes, hopes, aspirations and ideals. The man speaks to you in phrases caught from a thousand sources, and lettered boldly wherever space permits. Pithy sayings and others not so pithy grapple with your thoughts on stairways, elevator shafts, ceilings, and out-of-the-way places. The lettering is unusual and not like anything you have seen before. The words strained from their contexts and fixed in their constellations coalesce into a single mighty chorus.

"The man we speak of greets you as you enter the main building. His remarkable face, set in Christ-like mein in an etching of black and gold, is framed in a portion of the school's facade in heroic scale. It is a face worth scrutiny for it will dominate your thoughts during all your stay. It is the face of B. J. Palmer.

"Corridors throughout the building are lined with framed testimonials, glass-enclosed cabinets containing evidences of his great father, D. D. Palmer, his family and his times, photographs, trophies, and stuffed animals.

"The classrooms are large and equipped for sound. Graphic aids and charts are permanently displayed on walls, and cabinets are well stocked with plastic reproductions of human viscera.

"Students at Palmer practice their recoil adjustments on inanimate objects first. In the room devoted to this project we came upon a series of up-ended receptacles on which sections of automobile tires carcasses were fastened.

"We found the radio station at the very top floor. It was not in operation at this time. It was from this part of the building, too, that the school had equipment assembled to carillon the hours, a custom commented upon favorably by a local minister as his publicly displayed letter testified.

"During our tour of the building we managed to get a good view of the oriental gardens in which had been accumulated treasured collections from the Far East. It was mostly in the form of statuary of variegated hues and shapes. I don't know whether we thus were guilty of evading the twenty-five cents levy from our vantage point at an upstairs window. At this moment we still are in a quandary as to the extent of our indebtedness to our host.

"We next visited the museum and found a display on which must have been lavished an extreme amount of care, love, and wealth. Although I am no authority, I would almost be bold enough to hazard a guess that one would have far to go to match the diversified array of dry spines—human and animal—in every imaginable form of abnormality. There were human spines bent S-shaped on themselves like the plumbing under a kitchen sink, and others misshapen even more grotesquely. They were far enough along in development to indicate that the individuals who possessed them had lived in that condition for years. We tried to picture humans so cruelly twisted but our imaginations weren't up to it. Then there was a series of skeleton embryos starting from a size hardly larger than a pigeon's egg, and ending with the fetus at birth. We were especially interested in studying the translucent membrane-like fontanelles stretched diamond-like between the cranial bones, resembling nothing so much as the membrane exposed when shell from the egg's end is removed.

"Then there was the cased mummy of an ancient queen of Egypt with an illuminated radiograph of her inner structure propped beside her. It struck the writer to remark how little man has changed in forty centuries.

"A skull immersed in a bath of amber liquid drew our attention. It had been treated by a scientist in Germany to separate it from most of its essentials so that it was quite transparent. The printed legend gave one to understand that by rotating the container on its turn-table and examining the skull with the aid of the transilluminating light the essence of an occipito-atlas subluxation would be manifest from three dimensions. If it please you, let me state that we found in favor of the claim.

"Part of the school's auditorium functions as the clinic for student internes. It has no provisions made for private examination and adjustment. Since adjustment of the cervicals is the theme here, it would appear that privacy is not a problem for consideration.

"The clinic for graduate doctors we found on the other hand to be a fit model for the Chiropractic profession anywhere. One was immediately impressed by the pleasantly appointed reception room. There was nothing remotely suggestive of a hospital or clinic about it. Instead, one found cheeriness in the surroundings, and attractive young receptionists who radiated health and hope.

"A small fortune must have gone into the clinic's marble construction. It is set off in efficient consultation and adjusting rooms, and X-ray and research departments. I'm not sure on this point, but I believe that accommodations are available for in-patients, too. This would be borne out by the fact that the clinic is equipped with a handsome ambulance for outside litter cases.

"When we had completed our tour of inspection we took off for a nearby restaurant where John promptly tied into a Palmer student. We held the

young fellow for about an hour during which we had him explain the school's theories as he understood them. He was willing and voluble enough, and thoroughly enthused with the school's Chiropractic philosophy. And he gave a good account of himself. His explanations were lucid and logical enough to make us feel that our own school did right by adding their technique to the curriculum of our course.

"If this student is an example of his fellows, then students at Palmer are to be commended for their burning zeal and faith in what they are about. A healer should have something of the zealot in him.

"Our trip, we agreed, had been fruitful and educational, and we heartily recommend it as a must for Chiropractor and neophyte alike.

"Valentine F. Orehek."

(The Lincoln Contact, Volume 1, No. 4, Lincoln Chiropractic College,
Indianapolis, Indiana.)

The Story Of BERNARR McFADDEN

The rise of Bernarr McFadden and ourself was like twins, as to time.

He began about the time we did to advocate a new venture in health methods. His struggles were much akin to ours. He was beset on all sides by old fogies who had prudish ideas about human body, unclad, being obscene.

Bernarr held there was nothing more beautiful than a beautiful body; and beautiful bodies meant healthy bodies. He, too, was arrested once, by Comstock, for publishing photos of bodies almost nude. Comstock was a male prude who didn't know difference between prudery and obscenity.

One day we received a wire asking for name and address of Chiropractor in New York. Bernarr had hurt his back. Reference was sent, and Bernarr recovered.

Once upon a time we took a Pullman-load of students to Mardi Gras in New Orleans. We parked train at Elysian Fields. We parked students in Pullman, nights. There were forty of us. Downtown, we were given courtesies of Elks Club, because we and several others were Elks. "Hello, Bill!" We certainly were!

Lo and behold, whom should we run into but Bernarr, exhibiting prowess of physical perfection in a black shadow box in a store in New Orleans. We introduced ourself. It was then we had a serious talk.

Bernarr was struggling to get ahead with his ideas. His publishing business was struggling. We suggested he quit traveling as a one-man-show and go into publishing business as one quickest way to put over his program. He took our advice, closed his show, went to New York, and began publishing one magazine after another, until he made a fortune.

The next time we met Bernarr was at our testimonial dinner given in McAlpin Hotel in New York. That was time Heinrich Duerringer got into a fight over Chiropractic and, altho a small man, he could out-yell any man I ever heard in a public banquet hall. But, that's another story.

From then on, Bernarr and we met at various times. We recall once we were invited to dinner at his home in a penthouse opposite Central Park. His three daughters were present. He served what we thot was coffee, which we were surprised to find at HIS table. It proved to be Sanka — and that was first time we had heard of

such. After dinner, Bernarr asked if we would like to see his daughters dance. Of course, we would. Girls disappeared for a few minutes, came back, and danced for us in the nude. They thot nothing of this; neither did Bernarr; neither did we. They were graceful as gazelles and as sweet about it as anything could be that was artistically done.

At another time, back in days of BIG parades at Lyceum, we had a PSC athletic float on which Bernarr was the king pin. Davenport, by this time, had heard much about him; knew who he was and gave him generous applause all along line of march.

In the fore part of August, 1949, at the age of eighty-one, Bernarr made a parachute jump from a plane, at 3,000 feet. Pictures and story were in Associated Press. One week later, we had him as one of our guest speakers at Lyceum. The evening he appeared, we had him as guest for dinner, at home. We secured a regular parachute for him. Photos taken. That evening, after he spoke to an overflowing big top of more than 5,000 people, we again had him put on parachute — from which he and everybody else got a great laugh.

Altho our methods are miles apart in practice, we have admired Bernarr for great fights to carry thru and wonderful good he has done to break down barriers on false modesty and prudishness in all forms. He was and is a fearless fighter.

More power to you, Bernarr.

The Story of HERBERT L. FLINT — AND MARINA

This is to be a brutally frank and open confession of the life of a boy who lived in alleys, and how this boy became a "big shot" in personal, commercial, financial and professional life in his home town. This man would have taken more schooling, had he known he was going to amount to something.

We will be criticized for this story, because it will reveal one tabu subject which polite society does not talk about, but which everybody knows exists. If this story is to do anybody any good, example must be told as it was. It truly is a Horatio Alger story.

The Palmer family — five of us — moved from Burlington, Iowa, to Davenport, when we were four years old. Father was so engrossed in his work that he practically left the bringing up (?) of us three kids to his wife, who was our fourth stepmother. We roamed streets and alleys. We were alley-cats, wharf-rats, dead-end kids. We knew every alley in downtown district, every back stairs into every building, every hiding place, every place where drygoods boxes were piled. We knew every garbage can and every grocery store refuse pile where we could find best pickings of choice pieces of food too bad to sell, but good enough for us to eat. We had hangouts and meetings of alley gangs.

Cops knew every kid in every alley. We kept off streets — mostly stayed in alleys we knew well. Kids of various nationalities, differing ages, different colors; kids from "the district," east as well as west, formed these gangs. These kids from tenderloin knew all secrets of their elders. Talk about juvenile delinquency of today! We had it plus in those days, because Davenport was a wide-open lush city then.

Elbert Hubbard said "Responsibilities gravitate to those who can handle them." Therefore, we were generally leader of gang who directed activities of petty thieving. We never broke into stores, robbed safes, or held-up people, but we did "swipe" apples from grocery stores. We would fasten a long string to a cork, put feathers in cork, and swing them into apple barrels in front of grocery stores. We were leader of a group that brot in The Saturday Blade from St. Louis — a paper that revealed rottenness of our city politics and city's politicians. Papers were shipped to Rock Island, brot over on ferry. We hid them until Saturday when we sneakingly sold them on streets.

At times, we would have girls of alleys as part of our gangs.

As a result of boys and girls commingling, street waifs from "the

district," there wasn't anything we boys didn't know or do with girls, and vice versa. All knew all "bad habits" which we secretly and openly practiced in packing boxes, hideout corners, when we would gather in two's or more in meetings. Girls were as anxious to play with boys as boys were with girls. Secretly we made "dates," hiding from eyes of those who might try to stop us. Occasionally "cops" would find us, warn us to behave, give us a Mrs. Caudle's curtain lecture, and turn us loose.

We knew all tricks of tenderloin of our city, which was reported to be most wicked city in the world, exceeded only by Port Said (Egypt) and Irkutsk (Siberia). There wasn't anything we boys wouldn't and didn't do to please girls, and they us — notwithstanding we were kids of tender age but worldly-wise. We secretly gloated and boasted amongst ourselves of what we were able to do.

These nasty-nice but pernicious habits grew until they became fastened upon us; with result our mentalities were zero, physical stamina shot to pieces. Deep dark circles under eyes told the story. Mentally, we were fagged and physically we had no pep or urge to do even slightest physical labor. We were told to do certain things and couldn't remember them five minutes; if we did, we had no desire to do. We were told there were 365 days in a year. When asked about it next day, we couldn't remember even that. We lied and told "fibs" thinking such was clever, avoiding doing most minor things. We had no interest in anything.

As to any future, we did not care, nor did we give it a thought. In later years, we grew to understand necessity of child knowledge of sex, and its vicious way of fastening itself into human lives and evil effects. Sex knowledge should not be delayed till puberty, neither should it be ignored until marriage bed. It should begin when we began — at five or six years, because it was then we were wise to too much — wrongly so. Had somebody told us what we needed know then, much that we went thru could have been avoided. Fifteen years of destructive living might have been constructive.

In those days, we were a mental derelict, a no-account kid bum. We spent our mental and physical sap pursuing false pleasures. We were one worthless hulk of degenerate boy. We were a cross-section example of the sexual delinquent of that era. Between five and fifteen, we were a confirmed and habitual sex-drunkard, dead drunk in the sexual gutter. We were uselessly and hopelessly lost in swamps of our estimation of importance of a healthy brain and body. We were mentally a dullard, as dead to mental world as any dope fiend. We had not yet learned that masturbation was the thief of brain food which destroyed mental values.

Years add sober judgment. Dealing with thousands of students in our school, plus experiences with thousands of sick people, all more or less involving some phase of sex experience or education, brings forth many problems in relations between sexes. Sex and hunger are two dominant appetites, either being so strong people will kill for food or for sex gratification. Over-sexed, under-sexed, or frigid people present serious problems between male and female. Example of a virile man married to a frigid woman presented a problem which led to complications involving every other view of living. Guatama Buddha said, "Everything in moderation."

There is nothing wrong with sex or conjugal relations. There can be serious wrong when either party is starved, or either party over-indulges. Within reason, all is as natural as eating, drinking, sleeping, or SOCIAL intercourse. There is no crime in religion or liquor when taken in moderation. Either can become a criminal obsession in excess. Many a person has gone insane over religion, over-feeding, or over-indulgence in sex. What a pity children are not taught sex life in homes in their growing, curious years. What a pity vast majority of children learn evils of sex on streets, or thru illicit relations outside the home.

If a man or woman cannot get food, or love, at home, they seek it elsewhere. Same is true of sex. If they do not learn natural processes and use of sex at home, they learn it illegitimately from experienced sources not normal, safe, or sound. Would that we could have saved at least ten years of our wasted life, by knowing things our parents knew but would not explain. Would that we could have saved the following five years recovering from evil effects of our wasted ten years.

Various patients of father saw what was happening to us. They saw what was obvious. They would frequently lecture to us, but always in that guarded, semi-revealing way — never openly talking frankly or showing us a better way. They would speak in that religious manner of "evils of sin" and how "Jesus would save us if we would open our hearts and give ourselves to Him"; but they never explained in plain understandable unvarnished words what to do to break pernicious habits and how to build ourselves for a better future.

One day, one patient, too timid to talk, gave us a book to read — *THE ROYAL ROAD TO HELL*. It showed depths of horrors of masturbation, how it ruined lives, stating that nothing could *ever be done* to overcome early effects of these habits, once they were practiced; one who practiced them was doomed to mental servility and inability and physical incapacities rest of his life. It was like telling the susceptible child mind, "Once a drunkard,

always a drunkard; once a criminal, always a criminal." Outlook for future of Bart J. Palmer was not bright. Perhaps purpose of book was to scare hell out of kids.

During those dark and dreary years, we got scoldings galore, beatings without end from our father and his wife, because we could not and did not remember things to do or how to do them; or would avoid doing them; or, if we tried, did them half right. More we were scolded, worse we got. We didn't care. We had no incentive. We were pepleless, thotless, and life had no bright side at any time in any way.

With idea now firmly rooted in our mind that future of our life was a total ruin, and nothing could be done to overcome destruction of ourselves, only enjoyment or kick we got out of life was continuation of practice of secret vices, by ourselves or with other boys and girls. Everything was negative, future was dark. We didn't care, for we were anchored to THE ROYAL ROAD TO HELL virtually and practically, and there seemingly was no cure out of the whole dirty mess.

That there has been a marked transition from then to now, is obvious. What brot this about? Here is where the story of Herbert L. Flint — and Marina — comes into the picture:

Herbert L. Flint was a professional hypnotist — greatest we have ever known. We have met others since, but none equal him. Marina was either his wife, daughter, sweetheart, or concubine — or neither — so far as we know or could find out. He played a circuit of theaters, in one week stands, in such cities as Keokuk, Burlington, Madison, Muscatine, Davenport, Rock Island, Moline, etc. He and my father were cronies. Being two birds of a feather, father often invited them to eat at our house. Whether or not they discussed us and our "sins" of omission or commission, we do not know, but we do know that Flint urged us to come on the stage to be tested as a subject. He did not encourage other boys of our gang. Flint could do nothing with us. We had no mentality to concentrate on his suggestions. Night after night we would go on stage, be tested, and sent off as a failure. This happened every night in his three-week stands in Davenport, Rock Island, and Moline. Second year repeated first; third year repeated second.

We hesitate now to learn what hypnosis actually is. People generally have crude and ignorant ideas, thinking it is domination of strong mind of hypnotist over weak mind of subject; that it is control of strength over weakness; that mind of hypnotist controls and directs activities of subject to do whatever hypnotist wills him to; that it takes a weak mind to be a good subject; that when subject is

hypnotized he is unconscious and does not know what he is doing. If any or all of this had been true, we would have been a wonderful subject for we had no will of our own. Many believe a hypnotist can force a subject to commit murder, which he would not do if he were not hypnotized. Many misconceptions exist in relationship between hypnotist and subject.

None of these ideas are true. We know, because we eventually became ace subject for Herbert L. Flint, and traveled with him two seasons. We were his subject, when he broke a four-hundred pound rock on our chest, being suspended with shoulders on back of one chair, our ankles on back of another. We were his ace-in-the-hole subject for varied tests to demonstrate value of hypnosis. We are, therefore, in a position TO KNOW and discuss intelligently what hypnosis is; what it does and does not do; how it works and when it cannot work; even to use of self-hypnosis which we have learned to use and direct in subsequent years.

Since those years, we have seen many amateurs misrepresent hypnosis, misstating its possibilities and facts to their audiences. One such we had on our Lyceum program in 1947.

Let us present, in its simplest terms, underlying principle which can be applied in multitudinous manners. In explaining this subject to various classes in later years, we often hesitated in presentation to suggest: "Jack, will you please open one of those windows? The air in this room is stuffy." As a result of the positive suggestion, Jack would open the window. To all intents and purposes, Jack WAS hypnotized. We, the hypnotist, had made a positive suggestion. Jack received positive suggestion and acted upon it by opening window. Jack was conscious at all times and knew exactly what he was asked to do. Jack's mind had to be RECEPTIVE to the suggestion. He had to have THE POWER OF CONCENTRATION to act upon the suggestion. Had Jack been an imbecile, idiot, insane, or had no mind of his own, he could not have RECEIVED suggestion, would not have had power of concentration, and he would not have had direction of physical activities to act upon it or carry it thru to completion. It takes a STRONG mind to accept a good suggestion; it takes THINKING values to act upon it; it takes PHYSICAL ABILITY to carry it thru to completion. What is more, it takes A WILLINGNESS upon part of subject to follow thru. If Jack would NOT murder, then no amount of suggestion could force him to.

One of usual and simplest tests given by hypnotist to subject, to see if he can and will ACCEPT suggestion and ACT upon it, is to ask him to fold his hands together and concentrate upon thinking, "YOU CAN'T OPEN YOUR HANDS!" It is a mental physi-

cal impossibility TO OPEN those hands so long as one CONCENTRATES on that "YOU CAN'T!" Moment one thinks, "How silly this is; I CAN open my hands," then he DOES open them. This proves he has NOT power of concentration on suggestion "YOU CAN'T!" If you keep thinking, "I CAN'T OPEN THEM," then more you try more impossible it is to do so. This business of tapping a subject on head, or snapping one's fingers at subject, is to suggest a change in line of thinking which subject voluntarily then does. Moment he changes thinking, that moment he changes line of action and opens hands.

Self-hypnosis is where one suggests to himself what to think to do. Many people go thru life constantly thinking "I CAN'T" do this or that, and so long as they think they CAN'T, they don't. When they self-hypnotize by suggesting to themselves that they CAN, they begin to do. Successful business men use "self-hypnosis" on themselves. Successful business men use hypnosis in positive suggestions to others.

Self-hypnosis is often made to oneself by thinking, "Nobody CAN hypnotize ME." That is true. So long as one resists invasion of suggestion from another, refuses to accept, nothing can be expected by way of responsive action upon his part, no matter who hypnotist is who is offering a positive suggestion, or how hard he tries to overcome resistance, for suggestions can or cannot have invasionary value according to whether one resists or refuses to permit their penetration. Refuse to permit suggestion to invade, and you refuse to think upon it or act in accordance with the request.

That constant pounding away of Herbert L. Flint, of OFFERING suggestions, began to infiltrate that something was lacking *in us* which we needed to know. It began to dawn upon our debilitated mind and body that Herbert L. Flint — and Marina, his wife, daughter, sweetheart, or concubine — were our life-savers IF we would follow him in his travels and let him change us from a ne'er-do-well negative to a positive up-and-doing fellow.

Week after week his positive suggestions gradually seeped in. We TRIED to accept, receive, and act upon them. AND THAT WAS THE TURNING POINT OF OUR CAREER — THAT WE TRIED! Eventually, Herbert and Marina taught us the EXTREME value of giving and receiving positive suggestions; how to receive and how to act. When we LEARNED THAT LESSON, WE TOOK THE DERELICT AND REBUILT HIM INTO SOMETHING WORTH WHILE.

From then on, we insistently and consistently trained our mind to follow that line of thinking. THAT laid a solid foundation upon which rest of our life has been moulded. Gradually, we rebuilt a

positive attitude towards life, thinking and acting. Gradually, we took the weak, insipid being we were and re-formed him into a strong dominant character. THE ROYAL ROAD TO HELL was wrong. THE ROYAL ROAD TO HEALTH was true. We could do anything we wanted to do if we wanted to long enough and strong enough. "WE WILL" became a line of reasoning.

Herbert L. Flint — and Marina — were typical show people. They carried with them several paid subjects, of which we were one. Audience did not know we were as much a part of troupe as were Flints. We would come up out of audience the same as amateurs and novices. Rest of subjects were local boys and men who volunteered to come upon stage and be hypnotized.

Objective of these shows was to make people laugh, to entertain and amuse audience with antics of supers. In this way, Flint got actors for free.

He would suggest to a man, "You are a boy, a very small boy. This broom is your hobby horse. Think about it, think hard, concentrate, and you'll realize you ARE a boy again and that broom IS your hobby horse." IF man accepted suggestion, he would soon be jumping about stage like a kid with a new toy. SO LONG AS HE CONCENTRATED ON THAT IDEA AND KEPT THINKING HE WAS A BOY AND BROOM WAS HIS HOBBY HORSE, it was a reality to him.

There is nothing new in any of this. Radio shows of today are hypnotizing hundreds of people regularly in same way, only they don't call it hypnotism. People play game for free prizes. Actors and actresses give themselves self-hypnotic suggestions that they are Richard the Third, Cleopatra, Romeo, and Juliette, and play parts in their acts. More they lose themselves in that part, more they think they are those characters, more proficient they become as actors.

Business men use it in salesmanship in various and diverse ways. Business men call it "reasoning" with customers, presenting suggestions as to why they should do this or that, that or this way, by preference. When we were clerking in department store of H. A. St. Onge & Company, we used power of positive suggestion in getting prospective buyers to accept OUR suggestions, and they all too frequently acted upon them by buying what WE wanted them to, which they had no desire or intention of buying when they entered store. Every SUCCESSFUL business man today knowingly or unknowingly uses hypnosis in presenting positive suggestions to buyer. He urges customer TO CONCENTRATE on what HE wants HIM to think. The moment YOU let CUSTOMER think

and TELL YOU what HE thinks or what HE DOESN'T WANT, your sale is lost. Ability to transplant YOUR thots into mind of buyer-customer by use of positive suggestions, and get him to act upon it by buying, is THE KEY to all sales success. WE use it every day. Every business man who climbs the ladder uses it. He must if he is to get ahead of mass of buyers. A recent large photo of Carl Sedlmayr is autographed to us and it says: "The greatest show man since the day of Barnum." (Mr. Sedlmayr is owner of world's largest carnival.) Why did he say that? Because we are an excellent salesman! Because we can be and are a hypnotist par-excellent.

Relationship between doctor of Chiropractic and prospective patient is no different. Too often patient tells doctor his aches, pains, symptoms, pathologies, operations — wherein patient does 95 per cent of talking. Too often Chiropractor sits and listens, and IS SOLD aches, pains, symptoms, pathologies, and operations by patient. If Chiropractor KNEW use of positive suggestion, of his selling THE PATIENT Chiropractic, he (the doctor) would do 95 per cent of talking and force patient to listen to vertebral subluxation, cause of dis-ease, vertebral adjustment, Innate Intelligence; and this doctor would SELL THE PATIENT. We sell THEM our idea. We NEVER let THEM sell us theirs. We sell THEM HEALTH. We do not LET THEM sell us DISEASE. We sell THEM CAUSE. We never LET THEM sell us EFFECTS. WE sell THEM vertebral subluxation. We never LET THEM sell us aches and pains.

Earlier in this story we told you in our earlier years we thot our life was ruined from there on in. Whether true or not, is best judged by use we have made of that life from then to now. Everywhere you see evidence of transformation. That we are TODAY a strong thinking and acting individual should be obvious. That we accomplished seeming miracles in battles we faced and licked, is well known to our profession. That our life was NOT ruined beyond redemption, is plainly seen. That we evolutionized that life by unfolding from within, and revolutionized that life from without, is to be seen in work and works accomplished far beyond that of millions who are still in dumps or do not know how to make the grade. NO LIFE IS RUINED from early promiscuous and pernicious habits IF individual wants to change them. Today we have unexcelled ability and power to concentrate on an objective, stick to it thru trying years, and accomplish herculean jobs. Today we have ability to achieve physical endurance overcoming obstacles which would have ruined millions of men. What WE have done, OTHERS can do if they try to do so and have know-how. And, somehow, that is purpose of this story.

Why do we, in this story, openly and publicly reveal these personal secrets of our misspent youth? To prove to other boys and girls of today who travel THE ROYAL ROAD TO HELL that all is NOT lost, even tho all looks useless to recover lost ground. There is a golden lining if one is willing and knows how to fight to lick impossible problems as we did.

Comparison between what we have described we were then, and what we have accomplished with life since, proves impossible IS possible. None of this came about by any preacher preaching over our head. It came about thru hard work from WITHIN OURSELVES and listening to advice of our Innate Intelligence from within. We do not believe that our life, any more than any other, was predestined to carry on this work and thus was given extra help from above. Herbert L. Flint — and Marina, his wife, daughter, sweetheart, or concubine — awakened within us desire to do and taught us the power of giving positive suggestions and receiving them with their accompanying ability to act upon same.

One summer, we were the invited house guest for one week at Flints' summer home fruit farm, outside Benton Harbor, Michigan. They fought like cats and dogs at home, from time they got up until they retired. On stage, as show folks, they were geniality personified. We slept in their home and ate meals at her mother's farm, adjoining. Three times a day, rain or shine, we trudged from one farm to the other, quarreling being soup-to-nuts during entire meal. Peculiar that two people who could sell themselves on value of positive suggestion on stage could not sell themselves on value of positive suggestion in domestic life. Peculiar that two people who did so much for us couldn't do same for themselves.

An afterthought — altho important:

Religion teaches certain thots and actions are "sin" unless sanctified by creed, church and clergy, under guise of being legal. That which is "sin" in one religion is an act of Creator in another. What is condemned legally here is condoned legally there. We usually publicly condemn in others what we privately condone in ourselves.

Any internal function which is natural and normal to ourselves or any of vertebrata is not wrong except as educated man perverts his thinking and makes it artificial, abnormal, and illegal, and thus construes it as an "educated and illegal sin." Any function which is Innately sane is not insane except as insane education construes it such.

Condemn or condone as we will, there are two classifications of people: very small minority group of free-thinking and acting originators who leave imprints on history; and large majority group

who "yes" everybody, who follow the mass, who live in glass house grooves hewn out by the class. The few who make history are strong and dominant uninhibited people, sexually. Dominant sex bodies make for dominant brain virility with dominant mental products setting a pace for leading mankind upward and onward. The vast many who follow path of least resistance are weak, insipid, inhibited people who construct their secret sex life to be abhorred and denied. Insipid, paralyzed sex bodies dry their glands and brains with withered thinking, which directs them to follow as commonplace slaves to accepted socialized customs of past and present.

Many's the time we've wondered how a convict felt when released from prison; when he gains freedom; when he puts confining high walls and locked outer gates behind! What are his reactions, having been forced to live behind locked bars, cooped up in a two-by-four room in a two-person cell, for years! What runs thru his mind when he reflects backward to his boyhood days of committing crimes of omission and commission against self, and now can go and do, when and where he pleases, and do so naturally?

Sex is the dominant passion. It actuates for construction or destruction. It is as natural as digestion, urination, or defecation. It makes or breaks men and women, homes and businesses. It were better to educate people to know its normalities and uses. Time has long passed when children and adults should be ignorant of natural and normal sex relations. Look what our life was when a boy; what it was as a married man; then pause and reflect!

The Story of FOGS

Did you ever try to drive on a smooth road, with a perfect-running car containing passengers who knew where they wanted to go, who had an objective in view yet couldn't get there?

Why?

Because of a thick, dense FOG that enclosed you as in a vise!

A fog is an all-enveloping atmosphere.

A fog is a subluxation interfering with vision, obstructing objectives, surrounding observation, making it impossible to clearly see to right or left, ahead or behind. You can't see another car coming, for the same reason he can't see you.

The damp fog drifts in thru the open window and drenches your face and hair.

Here and there you can hear fog horns or sirens trying to pierce a warning cry.

The Fog Bell

Afar across the waters,
Like an erie moan,
Sounds the solemn fog bell
With its mournful tone.
And the sailor listens —
In a fog bank caught —
For its voice to guide him
Into the harbor sought.
When upon life's ocean
We have gone astray
In a fog of doubt
That obscures the way.
As near the reef of lost souls,
We dangerously roam,
We hear God's watchful fog bell
To warn and guide us HOME.
(The American Drugless Physician,
June, 1928. Copyrighted 1928 by
H. D. Mildeberger.)

How like life is a fog — clear a little while, then the fog — dark all over.

Sit in a comfortable car, strain and struggle as you please, you are fettered and tied, leg-ironed and handcuffed, for you don't know where the road is; curbing on either side cannot be seen;

there are ditches and gulleys on left and right; you do not know when road will turn right or left.

You realize you are on terra firma; you know your car is running true; but you also realize you are helpless to help yourself, with skies closing you into a small circle. You make your way ahead, running in low, groping every inch of the way, every minute of the day — searching, hunting, hoping.

A fog might occur day or night. As you creep along, there come intervals when it SEEMS to break. You imagine you see dim outlines of objects. You shift to second, then into high, only to suddenly run into another bank of fog that seems thicker than one you just left. You drag along for hours, when suddenly the bank lifts and all is clear; you experience a thrill of relief as danger fades behind. You switch off lights, shift into high, and away you go to where scenic highways climb the great divide to the Observation Point where the world lies open before you, all around you!

FOGS CAN'T LAST ALWAYS!

WE ARE SURROUNDED WITH LIGHT!

WE ARE BLINDED TO FACTS ABOUT US!

WE HAVE EYES AND SEE NOT WHERE TO GO!

WE *SHALL* SEE WHEN THE FOG RISES!

Truth, facts, intelligence, understanding are everywhere, always present!

Yet they cannot get thru because of fog between.

We all live much like foreign people to potential visions intimately close by.

We are like strangers in a strange land, when in reality we are surrounded by friends in a friendly home.

In his Daily Editorial, Dr. Frank Crane states:

"An inability to see constitutes the greatest danger of life everywhere. If we could all see plainly there would be fewer misunderstandings.

"You may know that when a man wrongs you it is because he does not understand, for if he did he would not do so, and when you are angry with him because of his tort your angel has blinded you so that you cannot see.

"We all do much fumbling in the dark in our passage from the cradle to the grave, and those who can clear our vision render invaluable service to humanity.

"We are continually bumping our nose and stubbing our toes because of the darkness that fills our eyes. Much trouble in the divorce courts could be obviated could both parties see clearly and were they not blinded by some sort of passion.

"Trouble between fathers and children would not be of so frequent occurrence if all could see clearly."

The youth of today is passing thru a serious fog of jazz.

He is too young to perceive a vision; he is not old enough to grow beyond his fog.

How great a blessing if vision of age could be transferred to fog of youth; vision of father handed down to son, and same from mother to daughter.

Why are fogs mental hazards? Because human lives are at stake and you are responsible if you sit at the wheel and steer the car.

What would you give if you could cause that fog to rise?

This fog, like all others, will lift.

It may lift young, it may lift old; but when that fog lifts, there is the vision — just where it ALWAYS has been. Then the boy or man, girl or woman awakens, astonished that it was SO CLOSE. The vision of reality NEVER changes. Truth is permanent. Meanwhile, we wander in despair, hunting for a way out of the fog.

When man is driving thru a fog is a good time for him to keep his head!

Were you ever in a MENTAL fog?

Have you ever tried to live thru one?

Have you been in one and refused to admit you had one?

We get into a fog because we lose our vision.

We lose our vision because we have LOST OUR WAY.

Have you ever wandered into by-roads, thinking you were on the main road headed for your destination?

Soon you began to lose the customary billboards, sign-posts, name-signs, little hands that pointed your way. You knew where you WANTED to go, but soon you were lost — miles away from it. Why? Because mental fogs were obstructing your vision; because you THOT YOU WERE BLIND when you were not; because you WERE NOT BLIND when you thot you were. That's what makes a fog!

A fog is a bank of multitudinous illusions which obstructs correct observation, clouds your mind with extraneous interruptions, preventing your reaching your destination, making it impossible to see to the right or left, straight ahead or behind. You run in low and grope your way every inch, for weeks and months.

Being in the midst of a MENTAL fog is neither ignorance nor understanding, but can be likened to that period of the day when man neither sleeps nor is awake, but dreams the horrible nightmare of uncertainty.

Life is a series of fogs. We no sooner pass thru one than we run into another.

It is STAYING IN ONE that makes some men say that "Life is just one damn thing after another;" yet of such stuff is life made.

Seeing one fog disappear for a moment, many deliberately direct nose of their car back into another fog, refusing to let it get away. It is the passing thru one after another that makes other men say "Life is just one blessed fog after another," because truth is vision, and visions do not change.

Now and then, here and there, stands out an individual who has arisen above his fogs. He leads and tries to direct paths of those who will follow, even tho blindly, to safety.

Man is an independent but dependent being. He is independent BY HIMSELF, but dependent upon society. He MAY stand alone IN HIS CONCLUSIONS, but he is surrounded by a crowd or group-mind that disagrees.

HIS fog may clear; HE may gain a vision! If those who surround him remain in the fog, then HIS VISION remains helpless. HE COULD SEE, but THEY CANNOT SEE!

He is surrounded by dependents who exercise the prerogative of independents, thereby preventing HIM from doing for THEM or himself, preventing ALL from getting if HE could but make use of that which he HAS.

Given a man with a sense of intuition who HAS A VISION — HE, as a unit of society, CAN make it into a reality. But if execution of that vision depends upon public unity, and he does not get it FROM THEM, then HE, TOO, might as well suffer in a fog with them as to have a vision and be surrounded with those who have fogs; for no matter how useful he MIGHT otherwise be, he is useless when those who surround him make him so.

Every person in a multitude has the perfect right to the exercise of democratic fog judgment. And he has the right to pay the penalty for the right of exercising that right.

This is true of the unit, or of the group.

The penalty is as far-reaching as to whether the unit works alone or group works together, either way.

The great mass of unwashed continually live in fogs. They do not reason, nor will they let another. Unable to go ahead or back, they refuse to budge; they block the road and refuse to let other travelers go by.

We like to revel in the democracy fog that America is a country of the majority, by the majority, for the majority. The vision, however, proves that America is governed and controlled by minorities. If the mentally deficient, being in the majority, should exercise common democratic control, then mentally efficient, being in minority, could not exercise America's best, and we would get its worst.

Abraham Lincoln said: "God loved the common people because He made so many of them." This is judicious, but God made common man common because common man IS common.

If rich should give to poor, then those who have earned would give to those who have not earned; and, having earned, they would earn again, and others not having earned would lose what they had. If poor should get from rich, then poor would lose it and rich would get it back.

To give away is but to get back again; to get is but to give back.

Merit and service strike their level, whether it be a unit or group, in a democracy.

Our democratic country is governed, economically and politically, by minority who have vision. It can be no other way and be safe permanently from that majority who suffer in and live with their fogs.

To him who possesses a fog, the immediate looks real; the foreground takes tangible form — distance is as so many ghosts, objects are questionable, and outlines are hazy. The distant future is dangerous to guess, and the fog is upon us.

If man could break down his mental fogs, he could attain the heights, as do men who have no fogs.

We all live in fogs, more or less — difference being that some men are in DENSE fogs ALL the time, some men in LIGHT fogs only a PART of the time.

Those products men call great; those men whom some call great, are such only because they issue visions that come from the solemn and silent communion as they emerge from darkness of fog into daylight, when objectives are clear, destination is straight ahead, and ideals are ever before us.

How clear the way when the fog lifts.

How bright shines the sun when there are no obstructions to prevent its rays from reaching earth.

How brilliant is the vision when the mental fog disappears.

How often is beauty born of tragedy? Shadows are because of substance; sorrows are because of smiles; sacrifice is because of success; pain is only because of health; night is only because of day; even as hell was born because there was a heaven.

A man and woman were pals all their lives. He died, and the woman was left alone.

How could she live without him — her prop and stay?

The fog of GRIEF was now upon the woman.

PERFECT DAY

When you come to the end of a perfect day
And you sit alone with your thought,
And the chimes ring out with a carol gay
For the joy that the day has brought;
Do you think what the end of a perfect day
May mean to a tired heart —
When the sun goes down with a flaming ray
And the dear friends have to part?

Well, this is the end of a perfect day
Near the end of a journey, too,
But it leaves a thought that is big and strong
And a wish that is kind and true.
And mem'ry has painted this perfect day
In colors that never fade;
And you find at the end of a perfect day
The soul of a friend you've made.

FOGS CAN'T LAST ALWAYS!

WE ARE SURROUNDED WITH LIGHT!

WE ARE BLINDED TO FACTS ABOUT US!

WE HAVE EYES AND SEE NOT WHERE TO GO!

WE SHALL SEE WHEN THE FOG RISES!

Music is the great lifter of fogs to human minds; and "THE
END OF A PERFECT DAY" is the result.

"Is it that the haze of grief makes former gladness loom so great?"
(Tennyson)

Queen Lilioukalni loved her people.

The Hawaiian Islands were wrested from her and her people.

The day arrived when the Islands were ceded to the United States.

The FOG OF DESPAIR was now upon the people of this Queen. The Queen went up on Pali, the fog lifted, the VISION OF RESIGNATION appeared — and "Aloha Oe" was the result.

FOGS CAN'T LAST ALWAYS!
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WE ARE BLINDED TO FACTS ABOUT US!
WE HAVE EYES AND SEE NOT WHERE TO GO!
WE SHALL SEE WHEN THE FOG RISES!

A great composer — Mascagni — had a pal, his wife. They were inseparable companions. She died, and the blanket fog of blackness was upon him. Inconsolable grief surrounded him. His mind was a blank. He could neither think, write, nor compose. His wife's dead body and her coffin were before him. During the FOG OF SORROW, he wrote the first part of his *Intermezzo Sinfonico*, commonly known as *Cavalleria Rusticana*.

FOGS CAN'T LAST ALWAYS!
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WE HAVE EYES AND SEE NOT WHERE TO GO!
WE SHALL SEE WHEN THE FOG RISES!

As the fog lifted, the vision of her saintliness appeared; then came that beautiful song in his second part, with its coma, peace, and comfort to his soul.

Fogs of SADNESS often return with greater density, as it did to Mascagni; his wife's coffin and her body were again a reality. He closed his masterpiece with his inconsolable grief once more.

Russia with its wealth had Siberia with its poverty. With nobility in palaces, it had slaves in mines; with class autocracy, there was mass democracy.

And so the wealthy, autocratic nobility of Russia chained the poverty, democratic slaves of Russia and marched them into the cold dungeon of that dark, distant, icy, Siberian land.

FOGS CAN'T LAST ALWAYS!
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WE ARE BLINDED TO FACTS ABOUT US!
WE HAVE EYES AND SEE NOT WHERE TO GO!
WE SHALL SEE WHEN THE FOG RISES!

Fogs of TREACHERY AND MALICE lifted — to one man — the VISION OF SACRIFICE appeared. He immortalized these martyrs with his MARCHE SLAVE; and then again came THE VOLGA BOATMAN with the trudge, trudge, trudge of heavily frozen feet dragging freight-laden boats. That fog of misery raised and another man memorialized the tragedy of a downtrodden mercilessly-cowed people.

In the rectory of the Dominican monastery, Milan, Italy, is Leonardo di Vinci's LAST SUPPER. It is the personification of this man's vision of that occasion.

Thursday, the fifth day of Passion Week, preparation for the last supper was started early in the day. It is assumed that the supper began about 6:00 p.m. This supper was laid in the "upper chamber" of St. Mark's house, attended by Christ and the twelve disciples. Christ rose during the supper, girded himself with a towel, and washed his disciples' feet. And, speaking of this instance, have you been in the Dominican monastery in Milan, Italy? Speaking of this masterpiece, each person portrays what each is thinking by saying it with position of their bodies, attitude of their hands, expressions of their faces.

Facing the painting, first to extreme left is Bartholomew, then come Jacob, Andrew, Judas, Peter, and John.

Facing the painting, first to the right of Christ is Thomas, then Jacob, Phillip, Matthew, Thaddeus, and Simon.

Christ sat in center, both hands outstretched, saying, "One amongst you will betray me."

Bartholomew, standing at end of table, looking direct at Master, is saying, "What?"

Jacob, standing, his right hand upraised, his left on Peter's shoulder, trying to gain his attention, looking at the Master, is saying, "That can't be true!"

Andrew, sitting, facing forward but more towards Christ, with an astonished expression on his face, hands upraised as in astonishment, says: "Certainly none of us!"

Judas, frightened, scared, slouches forward over the table, while Peter and John converse behind him; fear is on his face, as tho a secret were being broadcast as to who was going to do this dastardly trick. His right hand holds a bag of silver.

Peter, who has just gotten up from table, is leaning over behind Judas and is talking to John who has leaned his head over to Peter, and Peter is speaking directly into John's right ear: "Who can it

be?" seemingly taking the statement for face value.

Christ sits in center. His face is resigned, as much as to say, "The die is cast and none can change it." His mouth utters, in the same tone, "One amongst you will betray me!"

Thomas, first to Christ's left, coming towards Christ, back of Jacobus Major, has his left hand extended towards Christ, his right hand is upright, with one finger extended, as much as to say: "There is only one who would!"

James, sitting next, looks downward, as much as to say, "I am surprised, Master!"

Phillip, standing erect, looking towards Christ, with both hands pointing to his chest, says: "Not I!"

Matthew, looking away from Christ, facing Thaddeus and Simon, with both hands extended towards Christ, is saying: "Would anybody betray Him?"

Thaddeus, standing erect, looking towards Simon, is silent, listening to the conversation passing between Matthew and Simon.

Simon, sitting at extreme end of table, looking at Matthew, with both hands upraised, says, "There isn't a traitor amongst us!"

As this scene is enacted upon the stage, Judas slinks away, his conscience burning him.

It also personifies the passing of a BOY'S VISION into a MAN'S FOG OF ABANDONMENT—the boy who, as a choir boy, sat for the face of Christ; the man who, as a prisoner, found by di Vinci in the underground dungeon of the Doges palace, sat for the Judas. Truly, it can be proven that man's visions or his fogs record themselves on his face.

Michelangelo was another character who stood out as a man of vision; — his David, Moses.

He, too, was surrounded by multitudes who suffered with their distorted and poor judgment fogs of his ability.

He, too, suffered with a remorse inferiority-complex fog as a result.

FOGS CAN'T LAST ALWAYS!

WE ARE SURROUNDED WITH LIGHT!

WE ARE BLINDED TO FACTS ABOUT US!

WE HAVE EYES AND SEE NOT WHERE TO GO!

WE SHALL SEE WHEN THE FOG RISES!

He came out of his fog of discontent and produced "TRUTH", which was a figure of a beautiful nude woman. He called his distorted and poor-judgment fog friends to view it. When asked, "Why the figure of a nude woman?" his answer was, "Truth is unadorned and unashamed!"

Then came his masterpiece, his "PIETY", which is now in the basilica of the Vatican in Rome.

A man once came, saw, heard, thot, and preached a better way to be saved.

He went to the Mount of Olives to pray. He was kissed — and betrayed. He was crucified.

FOGS OF PREJUDICE AND DISBELIEF appeared and beclouded his way.

FOGS CAN'T LAST ALWAYS!

WE ARE SURROUNDED WITH LIGHT!

WE ARE BLINDED TO FACTS ABOUT US!

WE HAVE EYES AND SEE NOT WHERE TO GO!

WE SHALL SEE WHEN THE FOG RISES!

Historical fogs appear and disappear; visions appear and permanently remain; and Christianity is the result. We have stood under that olive tree in Gethsemane. We have walked the Via Dolorosa.

We have tarried by each of fourteen stations, closed our eyes and felt His weighty burden.

It was in the Garden of Gethsemane, on the slope of the Mount of Olives, eastward of Jerusalem, where the Son of God had His agony and arose to be betrayed by Judas with a kiss.

His disciples fled. He was taken before Caiaphas, the high priest, and tried by Sanhedrin. Accused of blasphemy, He was condemned to death by the ecclesiastics. Pontius Pilate sought to evade his responsibility and turned Christ over to Herod. Herod sent Him back to Pilate, and He was sentenced to death on the charge of inciting an insurrection against Rome.

He was led away by soldiers, compelled to carry His cross, but relieved by Simon the Cyrenian. On Golgotha, Mount of the Skull outside the city, He was crucified. About three o'clock in the afternoon, He "gave up the ghost."

That was the day of the Passion fog. No human tongue or pen can worthily describe its destiny. Not a ray of mercy was seen that day. Scorn, vituperation, hatred, the cry for blood by an infuriated befogged mob, the agony of vile usage and humiliation, a heart

broken by bitterness and desolation, jeers of the crowd, curses of the soldiery, a crown of thorns, and a pierced side were the elements of a fog that helped to make this a day of historical accidents, intentionally committed.

Beside this dark, dense fog note the VISION OF TENDERNESS toward His mother whom He commended to the care of a disciple.

Hear His cry of forgiveness to those who put Him to death. He comforted the thief on the cross. We are told that the after-effects of His death wrought consternation among the people. The veil of the temple was rent in twain and nature groaned in sympathy. After nineteen centuries and longer, we today realize His death was a turning point in civilization.

We then realized more fully and deeply than ever before that we were living in the atmosphere of HIM who had a vision yet was surrounded by mobs of those who lived. HE died a victim of fogs of others.

Shah Johan once loved a woman of his harem — all were chattel slaves to dispose of as he desired. She died, and the FOG OF LONELINESS settled deeply into his heart. In grief, he pined till his death.

FOGS CAN'T LAST ALWAYS!
WE ARE SURROUNDED WITH LIGHT!
WE ARE BLINDED TO FACTS ABOUT US!
WE HAVE EYES AND SEE NOT WHERE TO GO!
WE SHALL SEE WHEN THE FOG RISES!

As the fog of MOURNING lifted, a vision appeared. He would immortalize his MUMTAZ MAHAL with the most beautiful building in the world.

THE TAJ MAHAL took form.

It was and is the greatest physical tribute ever paid to any woman by any man.

It took 22 years, 20,000 slaves, and \$300,000,000 to build it, in 1492.

We saw it, admired it. Away above and beyond the buildings, architecture, and grounds, was the wonderful VISION OF LOVE which conceived it, bounded it, with which it was surrounded — THE SPIRIT OF TAJ MAHAL.

We felt the intense burning suffering of a man's love for a woman; the Mohammedan's love for the "Elect One of the Palace."

Human fogs sometimes have a peculiar perversity of settling back upon human beings involved.

Shah Johan's son incarcerated the builder of this marvelous mausoleum, for seven years. When dying, the father asked to be placed on a balcony, one half mile away, where he could see the Taj Mahal of his loved one; and, dying there, the foggy banks again arose and gave him clarity of his vision.

How peaceful must have been the end!

The heights of visions are reached only by going thru depths of fogs.

Sun is brightest to him who has lived in darkness; liberty is sweetest to him who has had it restricted; love is great only to him who has endured brutality; and only those can understand vision who have endured the fighting struggle of a burning desire to get from under a fog.

No other torment is so terrible as that of him who is just sane enough to know it and cannot prove it, but is just insane enough to know it and cannot prevent it.

Millions exist in living DEATH encompassed with darkness, imprisonment, brutality, insanity — amidst their fogs, not knowing there is anything better in life for which to live.

When is a fog not a fog?

When is that which appears a fog to others, a vision in reality?

Why should that which is a vision be permitted to exist as a fog in minds of others?

Examples: Lincoln and General George M. McClelland.

Lincoln and his Question No. 2.

Wright Brothers were bicycle tire repairmen. They conceived a heavier-than-air flying machine. They knew where they were, because they knew what they were. They had an objective of a heavier-than-air flying machine.

Between vision IN THEIR MINDS and vision IN REALITY, was difference between many fogs and the objective.

Each time they built a model, tried it, and came to earth with a smash, they passed thru the VISION OF HOPE into the FOG OF DISAPPOINTMENT.

Smash after smash, hope after hope, disappointment after disappointment is the experience of all dreamers of greater service.

Wright Brothers could have smashed a model, stopped discouraged, stayed put in this fog, and the objective lost in the haze.

Many another man has many another idea, tries to personify it, fails, and stays put in that fog. The difference between success and failure is that one **KEEPS ON KEEPING ON GOING THRU ALL FOGS**, other gets into a fog and stays there.

Modern times have people with fogs and visions, as well.

Possibly you have seen or heard about our **A LITTLE BIT O' HEAVEN**. It was but yesterday, as time goes, when we were surrounded by those fogs which were impenetrable.

FOGS CAN'T LAST ALWAYS!

WE ARE SURROUNDED WITH LIGHT!

WE ARE BLINDED TO FACTS ABOUT US!

WE HAVE EYES AND SEE NOT WHERE TO GO!

WE SHALL SEE WHEN THE FOG RISES!

There's a way out of every fog.

Every dark cloud has its silver lining.

We began, in the depths of despair, to dream about something beautiful. It took form in our mind, mentally; at hands of our co-workers, physically. As fogs of misunderstanding lifted, vision appeared and **A LITTLE BIT O' HEAVEN** took us out of those fogs.

YOU see **THE VISION** and call it **A LITTLE BIT O' HEAVEN**. We recall vividly **THE FOGS** and call it **OUR INSANE ASYLUM** — for there beauty was born of suffering, where a human hell was converted to an earthly bit of heaven. Stone by stone was set in cement mixed with tears; heartaches trudged feet back and forth; every design was wrung from a spirit of suffering and sacrifice.

You go thru and admire its **BEAUTY**; we wonder about it, wander in it, and remember man's inhumanity to man for perfect service well rendered.

Millions of our people are mentally or physically behind a fog of sickness or distress. They badly need somebody who can pull aside the veil of understanding of disease and its cause.

Thousands of people have tried to part the veil of secrecy that hides help and prevents health from reaching them. Work as they have, try as they might, the world seems little better from its fogs of sickness and distress today than yesterday.

Some day some person will arise, somewhere, who will thunderbolt his way into a vision that will be revolutionary and evolu-

tionary, who will ruthlessly part the air of mysticism, and with his magic wand of understanding will push back fogs and do what people have a right to expect be done, that they may be healthy, wealthy, and wise. The man of vision, with a service, is just over yonder, over the horizon. You who live will yet hear his voice.

And while in the fog, even tho we cannot see, we must constantly and repeatedly renew our faith in truth, knowing that the car is in perfect running condition, gasoline tank is filled, tires are pumped up, road is under us, behind us, and ahead of us.

And while in the fog, even tho we cannot see, we must constantly and repeatedly renew our faith in truth, to guard against gutters and gulleys on sides, watch for right and left turns ahead, travel slowly but surely and safely, until the vision appears.

There are gulleys and gutters to left and right; there are sharp and short turns ahead and behind. To put on full speed DURING THE FOG is to meet disaster.

During a fog is the time to renew our faith, rebaptize and again consecrate ourselves to our safety-first Chiropractic principles and practices.

Eyes blinded by the fog of things cannot see truth.

Ears deafened by the din of things cannot hear truth.

Brains bewildered by the whirl of things cannot think truth.

Hearts deadened by the weight of things cannot feel truth.

Throats choked by the dust of things cannot speak truth.

FOGS CAN'T LAST ALWAYS!

WE ARE SURROUNDED WITH LIGHT!

WE HAVE EYES AND *WILL* SEE WHERE TO GO! Then, with VISION before us, we can shift into high and reach our objective without interference.

And while in the Chiropractic fog, even tho we cannot see, we must constantly renew our faith in our truths:

1. Concussion of forces produces vertebral subluxations which
2. occlude the foramina and produce pressures upon nerves, thereby
3. interfering with transmission of mental impulses, thus
4. producing the cause of dis-ease at their peripheries.
5. Vertebral adjustment releases pressure upon nerves
6. restores transmission of mental impulses

7. reproduces cause of health at peripheries
 8. and our objective is reached.
-

The most successful man we have ever known died without money to pay his funeral expenses. Newspapers mentioned his death but omitted adjectives. This man had lived without acquaintance with vice. He worked hard, paid his debts, taught his family to enjoy living, and taught his children to work. His burdens were pleasures. He did not know how to complain. He had the respect of everybody in his community — including a few enemies.

Why do we call men of this type failures? In what particular have they failed? We do not say that a minister has failed because he has written no poetry, or that a banker has failed because he cannot shoe a horse. We cannot measure man's success until we learn where his vision lies.

If mere getting is success, why deny honor to the safecracker?

Is a man a success if he gets money by methods that lose him respect of his fellows and give him no pleasure in his own society? Is he a success if he gets money and raises daughters to be fools, and sons to be loafers?

King who rules an unhappy and maltreated people is a failure. Carpenter who hangs a door well is a success. There is more honor in using one talent well than in abusing the possession of ten.

To keep clean, to do good work, to earn friends, to be happy and bestow happiness, to develop opportunity, to serve where possible and learn not to whine — this is vision! There is no greater. There is no other vision!

A Thought For Today
By Rev. W. H. Carwardine.
Lost in the Fog

An eminent scientist discusses, in the Atlantic Monthly, the efforts that have been made to "dissipate fog." He says: "The quest is on; it may not come for years, but the steady increase in knowledge will ultimately lead to methods that can be used to dissipate fog." What an achievement that would be for the Lindberghs and Chamberlins who have to fight fog in their air trips.

But there are other kinds of fog that we must learn to dissipate. The fogs of prejudice and intolerance that interfere with clear thinking and mental poise. What a lot of people there are who are befogged over matters religious. One man sends me a long line of script which if followed out will solve all the problems of life. Another wants this paper to publish his book that will settle all the problems of life, here and hereafter. What do these gentlemen think we are, anyhow?

It seems to me that more people are befuddled over religion than over any other subject. The modernist and the fundamentalist in theological discussions

are no doubt sincere, but it seems to me that it all leads to fog. It was awful to hear the old foghorn blowing day and night when we were off the Banks of Newfoundland. But how glorious the snappy breeze, the clear sky and the joy of sunshine as we plowed our way over the deep, away from the fog. Why worry over a lot of problems that befog the intellect and muddle your soul when the Good Book has so much in it that is clear, sunshiny and beautiful for life? Does thought mean fog? Does investigation mean dull and stupid groping in the night? Some minds dote on dialectical disquisitions. They feed on argumentation, and rarely get anywhere.

Let not fog destroy your faith in the eternal verities of God and life. Life is too short to waste on a million vagaries touching immortality, the divinity of the Man of Nazareth and the individual and social regenerations of His philosophy. Political, socialistic, religious, economic fogs abound. Where is the scientist or theologian or great leader who can show us how to dissipate these fogs that are worse than the fogs of earth and sky?

(Chicago Examiner, June 11, 1927)

I am a voice pulsating in the ether, filling the air everywhere.

I am an idea handed down from the Divine Mind, and I am hailed with joy as a messenger of inspiration — the forerunner of bigger and better things.

I was first heard and made captive by dreamers of dreams; men who had vision and inspiration when insulated from earth by slumber; unselfish men who gave me to others without money and without price.

At first I could speak only in whispers. Now my voice — of higher planes — has been strengthened and amplified by cunning craftsmen, setting dull ether waves vibrating and pulsating to the sound.

At first I was a feeble toy, the plaything of youth; but I have grown until the keenest minds are at work to give fuller expression to my voice and to increase the good I do. My voice is still the voice of youth; but I have changed the life of nations.

I am the new voice that is revolutionizing the methods of teaching and reaching people. Times change, but the human emotions, passions, and prejudices — never!

The pulpit and the university reach the masses of the common people, and "God must love the common people, for he made so many of them," as the immortal Lincoln said.

My voice appeals to every class — the young and old, rich and poor, great and near-great, of every color, creed, or country — to all who have ears to hear — the learned and the unlearned.

I know no creed or dogma, but my voice links you to the unseen, higher life that exists within you, with you, above you, and all

around you; that recognizes a knowledge of God as a personal possession instead of a profession.

I have revealed that the voice lifted in prayer may reach the farthest sinner locked inside a dungeon.

I travel with the speed of light and thought, and speak in many places in many languages, in many ways, and at all hours.

By my magic you are whirled through space from the Poles to the Equator; from above the clouds to the gardens on the ocean floor; from the marts of busy man to the haunts of the wild beast; from the king's chamber to the hut of the savage.

I speak in Davenport and my voice is heard in Rome or Manila.

I make possible a tour of the world in your home — taking the listener everywhere, thereby making him a better citizen.

I discuss old and modern problems, analyze and solve them for you.

I am the voice of Radio.

I bring music, mostly good, to lift you up out of depths and cause you to forget them and to remember what you should. Music is a great leveler of a common language. For a few cents, I bring to you a fortune in artists. Away out there in the snow-packed plains, valleys, or hills; away out there on the desert or ocean, I bring you the best of the world.

I am the great dispenser of service.

I have brought the ends of the earth together and for the first time people of the world are better understanding each other's needs.

I save lives on sinking ships.

I comfort the sick, cheer the lonely, uplift the depressed, and bring religion where hitherto it was impossible for it to gain admittance.

I delight, enthuse, inspire, and uplift all to higher planes — speaking to the lonely man sitting in remote places amid mountain snows or desert sands; bringing news of the day and the familiar songs of long ago.

I bring the family closer together and bind them with cords of mutual interest and better understanding of the evening hours.

I keep wayward, restless youths in home circles during long evenings, while I fill them with delight, singing best songs, telling latest news, or describing latest marvels of science.

I have a beautiful home in the top of an executive building in

the metropolis of the Mississippi Valley, where snowy down or rainy weather or sunshine exists.

I am the vision broadcast by Station G O D and received by man when fogs or semblances of fogs are absent.

And thus another fog arises — the vision appears —

MY CALL LETTERS ARE R-A-D-I-O.

I am Radio Station WOC.

The Story Of WHO VETERANS FORUM

Col. B. J. Palmer received invitation to attend as guest-speaker, the National Convention of Veterans of Foreign Wars, New Haven, Conn., in July (1935). He also received invitation to be guest-of-honor at National Legion Convention, New Orleans, La.

At the Iowa Encampment, at which the following talk was given, Col. B. J. Palmer was a speaker at Annual Banquet; was in Review Stand at 2 mile long parade and invited distinguished guest speaker at Fair Grounds 2nd day of Encampment.

Talk Delivered at State Convention D.A.V., V.F.W.,
Perry, Iowa, June 6, 1935.
Col. B. J. Palmer

Nobody knows how far-reaching some thing we may think, say, or do may affect the lives of millions tomorrow. How little it sometimes takes to get another started to rolling a tremendous good to countless numbers. With that bit of philosophizing out of the way, let us show you what we mean.

Early in 1934, Comrades Ed Blegelid and H. G. Ryer got to the ears of Comrades Peter MacArthur and Ernie Sanders of WHO, a tale of woe which amounted to a national call for a genuine service WHO could render if it would. Tales of woe are common, but tales of aid are not.

This tale is worth reciting:

Out in the great open spaces of our American States and possessions, are thousands of soldier veterans sick and disabled. They need and are entitled to health service; they don't know where to go, to whom to write, how to go about it, where to send for blanks, how to fill them out, or where to present them if they did. In other words, sick are entitled to aid, but don't know how to go about getting it.

Said Ryer: "We want to connect those boys with the Government by having them write us, we will write them AND the Government, and thus get them together. If THEY knew WE were here to help, they could and would write us. But we don't know who they are and they don't know we are here for that purpose. That's where WHO comes in; let us talk to them over your station, we will introduce ourselves, they will write us, and we will introduce them to Uncle Sam once more."

There was something so practical and sensible, gone after in such a matter-of-fact, brotherly way, that it appealed to our organization as a measure of public interest service that WHO should render.

Beginning May 31, 1934, the fairy tale unfolds, for that is the first date WHO got into the picture.

THE VETERANS FORUM was formed under the guiding destinies of Ed Blegelid and H. G. Ryer. They have been on the air 52 times. They received over 45,000 letters, cards, and packages in that year—an average of 1,000 per week—from that many disabled veterans who needed help. This correspondence came from all States, Canada and Hawaiian Islands.

Let us cite three kinds of service rendered, by copying three actual cases from the files:

REINSTATEMENT

Gunnard Erickson, R.R. No. 3, Knoxville, Iowa, called at this office on March 18, 1935, in response to our radio program. He complained that following the economy act the allowance which was being made him by the Government had been discontinued. The Government contended that disability from which he was suffering was not service connected.

Action Taken: Erickson's folder was reviewed at the local Veterans Administration by a representative of the D.A.V., who later appeared before the rating board proving the disability was service connected.

Result: Erickson's allowance is now \$23.00 per month. Retroactive payments in the amount of \$138 were also procured.

INCREASE

Theodore R. Adams, Wapello, Iowa, wrote us first November 3, 1934, in response to our radio program. He complained that no allowance was being given him for his dependents. He was receiving \$70.00 per month for service connected disability and believed he was entitled to allowance for his dependents.

Action Taken: Adams' folder was reviewed at the local Veterans Administration by a representative of the D.A.V. A personal appearance was made by this representative before the rating board.

Results: Adams' compensation was increased \$12.80 per month making his payments \$82.80 per month. Retroactive payments in the amount of \$153.60 were also secured.

NEW CASE

Theodore G. Nesteby, Decorah, Iowa, brought his case to our attention December, 1934, thinking we could be of service to him also, after hearing our broadcasts. He contended he had tuberculosis and was permanently and totally disabled, but was not drawing compensation.

Action Taken: The first step in this case was to secure hospitalization for Nesteby. His claim was filed on December 31, 1934 and he was admitted to the hospital January 21, 1935. There being very little chance at this late date of service connecting this case, application was made for non-service connected disability.

Results: On March 28, 1935, Nesteby was notified by the Veterans Administration that his application for permanent and total disability submitted through the D.A.V. had been granted and the ward was \$30.00 per month with a retroactive benefit of \$90.00, dating back to date this case was first given to the Veterans Forum to handle.

In three years' time, 14,000 claims have been worked out and allowed these comrades. In brief, that's the big job. But it doesn't stop there.

The Veterans Forum started a 15-minute show about 1934. It was originally presented under the co-sponsorship of WHO and the Departments of Iowa, Veterans of Foreign Wars, Disabled American Veterans, and Reserve Officers Association. It featured a question-and-answer period in which Ernie Sanders asked the question which was sent in by veterans and/or their dependents concerning their rights under veterans laws, rules and regulations,

both state and national. Not long after the show started, Louisiana Lou joined the program and remained actively associated with it until she left. During that time she made hundreds of personal appearances in veterans hospitals in many states.

The Veterans Forum program continued until the end of January, 1941, when Ernie Sanders was called into service.

For several years, Bobby Griffin was the announcer on the show. Results of the Veterans Forum were amazing, considering the time of night it was aired. Eddie Blegelid told us that during the seven years the program was on the air, it drew approximately one-half million letters. A very large percentage of those letters, of course, went directly to Eddie Blegelid. During the years before the war, Eddie and Ernie attended, on a pretty regular basis, the state conventions of Disabled American Veterans and Veterans of Foreign Wars, because the feature was well-known and there was demand for their appearance at those gatherings.

When Ernie Sanders returned from service, he was given a twenty-five-minute period on Wednesday nights from 11:05 to 11:30 to use in presenting a reactivated Veterans Forum. It was then expanded so that representation of the Disabled American Veterans, Veterans of Foreign Wars, Reserve Officers Association, American Legion, Amvets, American Veterans Committee, and the Veterans Administration were included.

A committee was formed with representatives of each of the organizations on that committee. The committee met quarterly and set up program subjects to be covered during the evening quarter. A program format was worked out which included what was called a "main topic", questions and answers, and news. The "main topic" part of the program used about seven or eight minutes of the total time allotted. Question and answer period and news of interest to veterans consumed about five minutes each. The main topic usually consisted of a guest speaker on a subject of interest to veterans.

Responsibility for getting speakers was passed around among various members of the committee. Questions and answers were supplied by Veterans Administration or questions drawn from mail received. The news was supplied by the WHO newsroom and other sources.

The organization of the program worked very smoothly as the committee members assumed complete responsibility and carried out their assignments very well. The program under this format was very well received and became well-known among veterans thruout the nation.

The Veterans Forum publishes a four-page semi-monthly weekly newspaper called The Veterans Forum. As another example, they issued an air-call for playing cards, jig-saw puzzles, and tobacco for veterans. They received over 1,500 sets of playing cards, as a result. They issued a call for live talent to go to the Knoxville Veterans Hospital and the Des Moines Veterans Hospital. Comrade MacArthur of Station WHO rounds up some of his Barn Dance Frolic people and takes them out, for he appreciates what this means to the shut-ins. And so goes the good work down the line.

One year later, because of a deep-felt appreciation upon the part of the comrades themselves, they formed the Col. B. J. Palmer Chapter, D.A.V., on May 25, 1935. The beautiful colors were presented tonight.

The only excuse for any radio station being on the air is that it represents a genuine and worthy service to worthy causes. We have contended that Station WHO (Des Moines) and Station WOC (Davenport) are community owned Stations, run in the interests of the community for community service. We are glad to have been of service to the V.F.W., and D.A.V., and shall continue doing so in the future.

UNITED STATES OF AMERICA
THE DISABLED AMERICAN VETERANS
OF THE WORLD WAR

Incorporated

Charter for the Col. B. J. Palmer Radio Chapter, State of Iowa, No. 20.

This is to certify that the National Executive Committee of the Disabled American Veterans of the World War hereby grants a charter to

Peter MacArthur	Chas. E. Wandling	August Slott
John H. Bell	William Blues	Ralph B. Swan
Herman C. Claussen	Russell M. Hodgert	Tony J. Atkinson
Floyd J. Ritchart	John Slater	Carl Beinhart
Howard V. Andrews	Dr. Clarence Conner	Alexander Burns
Harold Fuller	Frank Haberkorn	Henry F. Mantenfel
Harry G. Ryer	Theodore Adams	James F. Albert
Verne F. Root	Mark Brophy	Giovani C. Calabrese
Glen Storms	Clarence Keckler	James F. McManus
Herman A. Schone	Phillip W. Young	Jesse E. Whittenburg
Milton J. Birka	Albert Boehm	J. C. Johnson
Roscoe Holden	Arnold Liden	Harold R. Gross

The required number of persons duly qualified for membership, having applied for a charter, and such application having been approved in due form,

Now, therefore, pursuant to the powers conferred by the National Constitution of the Disabled American Veterans of the World War, this charter is granted, and those applying, together with such others as may unite with them, are hereby authorized to establish and maintain a Chapter of the Disabled American Veterans of the World War at Radio Station WHO, Des Moines, to be known as Col. B. J. Palmer Radio Chapter, Number 20, Department of Iowa, and this Charter, unless revoked or suspended, shall be conclusive evidence of the lawful existence thereof.

In accepting this Charter, the said Chapter acknowledges the jurisdiction of and declares itself to be in all things subject to the National Constitution, each Annual National Convention, the National Executive Committee, and to the rules, regulations, orders and laws promulgated in pursuance thereof, and

further, said Chapter pledges itself, through its members, to uphold, protect and defend the Constitution of the United States; to realize the true ideals and aims for which we fought; to advance the interests and work for the betterment of all wounded, injured and disabled Veterans of the World War; and to encourage in all people that spirit of understanding which will guard against future wars. This Charter is granted with the understanding that in the event of dissolution, inactivity or revocation, all properties, records and money of the Chapter immediately becomes the property of the National Headquarters of the Organization.

IN WITNESS THEREOF, This Charter is given under hand and seal of the National Commander, duly attested by the National Adjutant, at National Headquarters in Cincinnati, Ohio, this 25th day of February, 1935, and countersigned by the Commander and Adjutant for the Department of Iowa, at Des Moines the 23rd day of May, 1935.

Countersigned:

Attest:

(Seal)

C. ABRAHAM PILICER
Department Commander

EDDIE E. BLEGELID
Department Adjutant

VOLNEY A. MOONEY, Jr.
National Commander

VIVIAN D. CORBLY
National Adjutant



50. In Assembly Hall of The BJP Clinic. The Colors.

DISABLED AMERICAN VETERANS OF THE WORLD WAR

Cincinnati, Ohio

VOLNEY P. MOONEY, Jr., National Commander

June 21, 1935.

Dear Colonel Palmer:

As National Commander of the Disabled American Veterans of the World War, I am privileged to extend a cordial and sincere invitation on behalf of our organization for you to attend our Fifteenth Annual National Convention, to be held at New Haven, Conn., July 17th to 20th, inclusive.

We trust you will find it possible to be with us and participate in our deliberations. We would like to have you address our gathering at our Annual Memorial Services, Wednesday night, or our convention sessions sometime Thursday.

With the hope that I will see you at New Haven, I am,

Sincerely yours,

VOLNEY P. MOONEY, Jr.

National Commander

Col. B. J. Palmer,
Palmer School of Chiropractic
Davenport, Iowa.

In recognition of patriotic service rendered to the cause of the wounded and disabled American Veterans of the World War.

This Certifies That Colonel B. J. Palmer is a duly qualified Active member of the

NATIONAL STAND-BY ASSOCIATION

of

**THE DISABLED
AMERICAN VETERANS OF THE
WORLD WAR**

The National Stand-By Association is composed of American citizens who have pledged themselves to support and stand by The Disabled American Veterans of the World War, and shall be governed by its National Constitution.

IN WITNESS WHEREOF, this Certificate has been signed at National Headquarters, Cincinnati, Ohio, this 21st day of May, 1935.

VOLNEY MOONEY, Jr.

National Commander

(SEAL)

VIVIAN D. CORBLY

National Adjutant

Vivian D. Corbly, National Adjutant,

June 27, 1935.

Disabled American Veterans,

2840 Melrose Ave.,

Cincinnati, Ohio.

My dear Adjutant:

I hereby accept your invitation to attend and speak before the D.A.V. Convention at New Haven, Conn. I cannot make it possible to attend all the sessions, but shall take care of some business in New York and then run up.

I have a talk which I think would be appropriate, but it takes one and a half hours — VISIONS OR ILLUSIONS. It is a comparative story of the lives of Christ and Abraham Lincoln, with modern applications. Please figure whether you want it at your Memorial Services, or the convention next day. It is hardly a "Memorial" talk within itself.

If you will kindly let me know, I shall arrange my work in New York to come up accordingly.

Sincerely yours,

BJP/M

COL. B. J. PALMER

3355 Kernu Street,
Honolulu, T.H.
March 28, 1935.

Station WHO,
Central Broadcasting Co.,
Des Moines, Iowa.

Dear Friends:

* Just a line from the land of sunshine "Paradise Isles" out in the great Pacific Ocean 2,000 miles from San Francisco, in reply to the request of Station WHO regarding the continuation of V.F.W. Program.

I wish to advise that program was received here at home, which is only a stone's throw from the beach at Waikiki and same was surely appreciated. Your signals were coming in strong, being easily heard throughout the entire six room house, on a 1929 Victor RE 45 model receiver. Your announcement was picked up at the termination of the program at 7:30 P.M., Honolulu time.

I am especially interested in the program of the V.F.W., as I am a World War veteran and wish for the continuation of the program and the good work of that organization. My hearty congratulations for the splendid program of the night of the 28th.

If it is not asking too much of you, I would like a copy of the station broadcast schedules or a copy of your local newspaper so as to enable me to follow the expected future broadcasts of the V.F.W.

Wm. Seymour,
Chief Engineer Station KGPQ,
Honolulu Police.

The Story Of DEBUNKING CONCEIT

CONCEIT: (Webster)

"2. Idiosyncratic conception; personal judgment; opinion.

"4. An overwhelming idea of one's self.

"5. A fanciful, odd, or extravagant notion — a whim, quirk, or trick."

CONCEIT: (Palmer)

That state of self-esteem where one thinks he knows all correct answers. Later he finds he was wrong, in part or in whole, resents being proven wrong, but modifies his ideas against his will. To be conceited is to be satisfied when one knows many problems exist for which he knows no solution, and is embarrassed admitting same. There is constructive ego and destructive conceit. Conceit is one's opinion of his ability beyond his delivery of know-how.

The conceited individual will come out on top IF he is sincere, honest, keeps on straight-line thinking; uses logic, reason, and seeks facts; is not perverted by emotions, passions, and prejudices; refuses to be side-tracked into fantasies and theories foreign to his fundamentals; adheres within the confines and defines of his principle and practice; avoids pitfalls of antipodal morasses, and has the courage of his convictions to admit same when so proven.

In our early days, nobody, including medical men, neurologists, and anatomists, knew where nerves exited from spinal column, or where they went to — except in a physical sense which was not proof of their physiological or biological distribution. Dissection knew paths of bundles of nerves — at least they thought they did — but which nerve fibers carried characteristic specific functions from brain to CERTAIN organs was not known. Dissection did not and could not prove physiological continuity connection.

Based on the Chiropractic theory of D. D. Palmer that some nerves *went* somewhere *from* somewhere *TO* somewhere, he adjusted "vertebral subluxations" *somewhere* for *something* sick and abnormal *somewhere*, and did get a certain per cent of sick people well who had been given up as failures by medical men using practices prescribed by medicine. The per cent of results was high enough to justify merit in his theory of a backbone cause of any, every, and all dis-ease regardless of organ involved. *Which* vertebra, *which* nerves, for *what* organ, were the great unknown.

Our Vol. XIII, issued in 1920, was exclusively devoted to digital nerve tracing on living, feeling, sick people who cooperated in

helping us locate certain tender nerves FROM certain sick organs TO their exit from the spinal column, and vice versa, enroute from brain to organ, and vice versa.

Thousands of cases were checked, verified; typical examples were photographed, accumulated, and printed in that book.

Eventually, as a result of this exhaustive research, we issued a meric system based thereon.

This was first of our major steps to systematization of spinal connection between cause and effect of D. D. Palmer's theory.

Because of localization of distribution of spinal nerve ramifications, conveying efferent flowing function to definitely localized organs, which quite frequently differed physiologically from dissectional anatomical teachings; and because these nerves WERE tender, and taut fibers WERE found at such localizations, we concluded that these particular localizations WERE the locations of THE vertebral subluxation CAUSING a certain dis-ease in a certain organ to which these nerves led.

The meric system, today, is as neurologically correct as it was then. The meric system, today is NOT correct as it applies to locations of vertebral subluxations causing dis-ease.

This was second of our major steps in proving D. D. Palmer's theory.

We then identified such areas, designating them by appropriate titles according to organ to which they went, such as:

BP — bronchial place
HP — heart place
LuP — lung place
LiP — liver place
SP — stomach place
SplP — spleen place
KP — kidney place
PP — privates place, etc.

As a result, we began "adjusting" at such places designated for certain dis-eases in such organs, getting a percentage well. For some further reason, unknown to us then, we were failing on a higher percentage than we were succeeding on. Why? (As to how and why we succeeded on what later proved to be wrong places, see other articles on "ACCIDENTAL CAUSATIONS AND ACCIDENTAL CURES").

This was third of our major steps in proving D. D. Palmer's theory.

FOUR elements MUST be present to BE vertebral subluxation causing dis-ease: .

1. vertebral misalignment
2. occlusion of a foramen
3. pressure upon spinal cord and/or spinal nerves
4. interference to a normal quantity flow of mental impulse or nerve force supply.

A vertebral subluxation is a comparison of the relative positions of ONE vertebra BETWEEN two others. One, alone, could not be subluxated. With two, EITHER ONE could be. With three, it had to be one BETWEEN co-responding ones above and below.

This was fourth of our major steps in proving D. D. Palmer's theory.

ALL the brain system has a nervous system which connects thru a DIRECT CONTINUITY system to and with all the body, both efferent nerves (function in motion) and afferent nerves (impressions in interpretation of sensation). That being so, there was a SUPERIOR meric system of the brain to counterpart the INFERIOR meric system of the body. Logically this connected localized body dis-ease with an individualistic brain "headache" interpretation equivalent, thus proving brain meres to match body meres.

This was fifth of our major steps in proving D. D. Palmer's theory.

Were there FOUR elements of a vertebral subluxation ALWAYS present as we believed, taught, and practiced in all twenty-four vertebral inferior meric system meres?

Two distinct and separate divisions existed:

1. PHYSICAL vertebral misalignment AND occlusion between three PHYSICAL vertebral component parts.
2. Pressures upon nerves AND interference to a normal quantity flow of an ABSTRACT mental impulse supply.

The first two elements could be seen in spinographs. The second two elements could not be seen, or sensed, by any human method.

To prove or disprove the first two, in 1910 we introduced the X-ray in spinography. It DID prove existence of first two physical elements at any and all inferior meric system localizations. It could not prove latter two.

This was sixth of our major steps in proving D. D. Palmer's theory.

If our concept of the inferior meric system of locations to "adjust" was sound, then according to its localizations there was ONE certain place to adjust; ONE certain vertebral subluxation for ONE certain dis-ease in ONE certain organ. Having located these places, designating them by name and number of vertebra, as we believed then, the question arose as to how accurately such system was being efficiently applied by one or all of our profession.

To test this, at one of our annual pre-lyceum post-graduate courses, we took two hundred graduate D's C., who had been in active practice and applying this inferior meric system to sick people for twenty-five years or less.

Inasmuch as these localized specific areas were ascertained exclusively by digital palpation count of the vertebral column, we put them to the test.

We had one hundred Chiropractors act as "patients," sitting on palpation stools consecutively numbered from one to one hundred. We had the other hundred Chiropractors act as "doctors" — consecutively numbered from one to one hundred. Each of the sitting "patients" was given a printed sheet with one hundred spaces for names of one hundred "doctors," and their palpation listings which they would report to "patient" who would record same.

The one hundred "doctors" were asked to rotate on each of the one hundred "patients." We went to each of the one hundred "sitting patients" and skin-pencilled two lines opposite the tips of two spinous processes of two vertebrae, differing as to location on each "patient," no two being marked alike. We then asked each "doctor" to rotate from "patient" one to one hundred, to palpate and count and report to each "patient" what vertebrae were opposite those two lines.

When test was completed, each "patient" had a complete report of palpation and count findings of one hundred different "doctors" on *same* two lines opposite HIS back. The name of each "doctor" was recorded opposite HIS findings. This was done so we could later check the accuracy of HIS findings as compared with ninety-nine others on SAME back. Obviously, this also became an objective lesson for the "patient"-Chiropractor who was being palpated, because he could see whether some, any, all, or none agreed.

Having completed this half of the record, we reversed the process. "Patients" became "doctors," "doctors" became "patients," and the records compiled in same manner. When tests were completed, we had two hundred records, each with one hundred palpation-finding reports.

What did any one sheet show as to agreement of one hundred "doctors," as to which two vertebrae were opposite the two lines on any one back?

NO TWO "DOCTORS" AGREED as to which two vertebrae those lines were opposite. One hundred "doctors" differed on ANY ONE back! This was true of EVERY record of two hundred "patients." Some were off count, as many as SIX vertebrae — sixth cervical became fourth dorsal; second dorsal was fifth dorsal, etc. The larger the difference, the fewer inaccuracies. Two or three count difference was regular.

Note following paragraphs from REASONS FOR MY FAITH:

"Record was kept of each person and his findings. We compared findings of those who rotated, on one back that was down. We found SOME off as many as six vertebrae; QUITE A FEW off at SIX; MORE off at FIVE; QUITE A NUMBER off at FOUR; STILL MORE off at THREE; TWO off was a regular thing. There wasn't ONE clear sheet where ANY ONE AGREED WITH ANY OTHER in any of ten class tests of more than three thousand Chiropractors.

"We tested this further. Half were down for palpation; half were up as palpators. We marked backs, drew lines opposite TWO spinous processes. We asked those UP to palpate those DOWN and name vertebrae opposite those lines. This time, we did NOT rotate palpators.

"We then took a ten-minute recess, doing foolish stunts about the room, after which we returned SAME UP-fellow to same DOWN-fellow. We asked him to again palpate and count down and name vertebrae opposite those SAME lines.

"Less than ONE PER CENT agreed with former findings TEN MINUTES EARLIER."

Why were these tests VITALLY important? If an actual case had stomach trouble (taking this as one of many examples), regardless of diagnosis, then SP — stomach place — sixth dorsal according to meric system, was THE one to "adjust" to get that stomach normal. Fourth or fifth, seventh or eighth would not do. To be off even ONE vertebra would be to miss "adjusting" THE RIGHT vertebral subluxation to get that case well. It would also mean we could do harm to wrong one which was normal and did not need "adjusting." To be off anywhere from two to six would be to miss being of any value, and possibly doing harm. This would apply with equal value to any other "place" in the meric system, as reports showed. If no two "doctors" agreed as to their count in correctly locating "SP" or sixth dorsal, or any other place, then it was obvious that no two doctors out of two hundred WERE actually adjusting the RIGHT vertebra day after day, except as an accident might occur and they might get it right occasionally. If no two agreed on ONE day, how accurate could ANY be, days, weeks, months apart? How accurate would they be on the same case that returned at some subsequent time?

No such accuracy is demanded in the practice of medicine because a diagnosis is guesswork, prescribing drugs is arbitrary and empiric, on which no two M.D.'s agree — or rarely, at best. That does not apply to Chiropractic where accuracy of adjusting ONE RIGHT vertebra becomes necessary.

If these palpation errors occurred on two hundred experienced people in ONE day, what would or could happen when various times intervened between daily visits of one patient after another, with the daily conflicting confusions entering the mind of the doctor? As he palpated and counted inaccurately from one day to another, he would adjust fourth dorsal as SP one day, fifth dorsal next, sixth dorsal next, varying according to discrepancy in his inability to palpate as the records showed. One out of three vertebrae was the right one out of one or more days. On other days when he "adjusted" above or below right one, it was equivalent to making the right one wrong. It was a "hit or miss" method. It is to be remembered in those days we were supposed to "adjust" the same subluxation EVERY DAY for weeks or months.

A broken-down analysis of any one "doctor" on his one hundred "patients" compared with other ninety-nine "doctors" on their one hundred "patients" proved many did not agree on any one case.

We broke down an analysis of ALL records. This test debunked the conceit of EVERY one of two hundred "doctors" who thot they were letter-perfect in their palpation count of every "patient" every day in this series of tests, as well as in their practices at home. This series of tests convinced them, so long as they believed the meric system sound, that it accounted for why they failed to get many cases well.

This was seventh of our major steps in proving D. D. Palmer's theory.

Being human, subject to mental development and growth on a radically new Chiropractic departure from the older established medical theories of life, death, sickness and restored health, we thot, as we palpated the relative and comparative positions of any three vertebrae and listed one of them as PRS, PRI, PLS, OR PLI, etc., that what we analyzed and so listed by digital palptation was right, couldn't be wrong; that we were always right and could never be wrong. Didn't we FEEL it so? Didn't we interpret WHAT we felt?

By 1915, it became apparent to a few of us, in our research work with spinographs, that there was a great discrepancy between the incorrectness of digital palpation and spinographic shadows of

what existed INSIDE to what we thought we felt on outside; and what contrast revealed in interpretations of what we thought were vertebral subluxations.

To prove this, we took the palpation listings of a trifle over 5,000 cases, of more than 400 experienced Chiropractors including most of our faculty, and checked each against other. There were errors of omission and commission in eighty-four per cent of cases, either in wrong count or wrong direction for adjustment. This debunked the conceit of a few of us. It did not, however, debunk the conceit of the profession at large who did not have access to research records we had. Many are still conceited enough to continue their educated finger interpretations, of their digital palpations on surface skin, believing they couldn't be wrong; and they continue to believe such is infinitely better than a picture of the inside produced by a cold, impersonal, inanimate, non-thinking machine.

Eliminating these errors stepped up our per cent of results. Few of these agreed with each other on same case. All were more or less at variance with each other, on location or direction. Chiropractic being an EXACT science of what is to be done, at definite location, in correct direction, any variance from the necessary meant a drop in restoration of health to any and/or all individuals.

Not until the spinograph became universal did they agree when they checked on themselves as we had done. What we thought was a sixth dorsal PRS was by actual X-ray count a fifth dorsal with a cartilaginous bent spinous process. And so various errors of palpation were revealed. We relied less and less upon palpation analysis and more and more upon spinograph analysis. Today we spinograph ALL cases and rely on palpation only in emergency cases where spinograph is impossible.

This was eighth of our major steps in proving D. D. Palmer's theory.

Gradually, step by step, we were rearranging our evidence, shifting it from things we didn't know to things we changed, proving the first two of four fundamentals of a vertebral subluxation.

What about the two ABSTRACT elements? As with the former two, we thought we knew.

A vertebral subluxation sequentially produces PRESSURE upon or around spinal nerves or spinal cord and thereby offers RESISTANCE to a free flowing normal quantity of mental impulse supply of nerve force at point of constriction setting up an increased ab-

normal heat. The resistance to flow dams backward and upward into brain and starves forward and downward to body.

This was ninth of our major steps in proving D. D. Palmer's theory.

Then came Dossa Evins who invented and patented a thermopile heat detector hooked to a sufficiently sensitive galvanometer built to register within the range of this low quantity of spinal nerve or spinal cord resistance abnormal heat.

This neuro-calo-meter LOCATED THE PLACE of pressure and resistance, the degree, whether it was left or right of spinal column, when it was and when not present, before adjustment when it WAS present, and after adjustment when it WAS NOT present.

This instrument located the third and fourth ABSTRACT elements of a vertebral subluxation proving WHERE it was. It could not locate it where it was not. It could not locate it at some place because *we thot* it should be where it wasn't.

This series of researches debunked conceits of everybody who took its efficient use seriously. We did not TRY IT. It TRIED US, forcing us to reshape and reconstruct many previous suppositions.

This was tenth of our major steps in proving D. D. Palmer's theory.

Were we seeing what we were looking at when we watched fluctuations of NCM needle? Were we seeing more or less of what we WANTED to see? Were our eyes deceiving us? Were we seeing only a part of what was being delivered by the needle? Were our minds interpreting correctly or incorrectly, more or less than received? Were we able to accurately or inaccurately draw a graph of what we thot our minds interpreted — be it right or wrong? Were the break readings or mean line heat readings where we thot we saw them? In other words, were we so steeped in our conceit that we were unable to change by improving our facts?

A group of NCM technicians, regardless of number, with SAME case, SAME neck or back, SAME supposed subluxations or areas being read, SAME resistances, SAME heats, SAME NCM — each of the group reading — would record as many DIFFERENT hand-drawn graphs as there were individuals in the group. Why? The ONLY difference was in THE DIFFERENCES IN THE PEOPLE. THEY were the variables. How to eliminate them? Let an instrument do what people were unable to do — agree! Ten pairs of eyes look at what ONE needle is doing and telling, and see ten

different results. Therein is the conceit of men. Each man, alone, in HIS office, on HIS cases, knows HE is ALWAYS correct; never reads wrong; HIS eyes see correctly; HIS mind interprets correctly; he can and does reproduce hand-drawn graphs EXACTLY as needle indicated.

There was ONE way to find the answer to these and many more questions: — to automatically and mechanically graph readings direct from NCM, thus eliminating the variables of human beings.

We used to think we saw two to five break readings up and down full length spinal readings. An analysis of thousands of cases of neuro-calo-graph readings failed to prove such. The neuro-calo-graph debunked this conceit of man and proved there wasn't one such in five hundred cases. In carrying on this kind of research with the neuro-calo-graph, we debunked our conceits on many vital questions.

This was eleventh of our major steps in proving D. D. Palmer's theory.

The neuro-calo-graph found and located the third and fourth element of vertebral subluxations; where they were and were not; when they were and when they were not. It proved there were no pressures or interferences below axis. It proved the old conception of our inferior meric system was neurologically as sound as in the days when we advanced it. It also proved the inferior meric system of various subluxations at HP-LiP, SP, KP, etc., no longer were. It proved non-existence of pressures or interferences at any, every, and all vertebrae below axis.

Many Chiropractors today continue in their conceit that they know; continue to punch away at such places day after day, satisfied that what they were taught then, what they have been practicing since, is still good enough today in spite of evidence we have produced to contrary. Those good old "horse and buggy" days!

This was twelfth of our major steps in proving D. D. Palmer's theory.

The neuro-calo-graph, in addition to proving that the ONLY place a vertebral subluxation had the third and fourth elements present was at occipito-atlantal-axial area, also proved that when the subluxation at ONLY THIS place was adjusted only when pressure and interference WERE present, did not need to be punched day after day, week after week, and month after month. By checking day after day, the neuro-calo-graph proved that after ONE adjustment given at right place, at right time, in right way, there was

no longer pressure or interference present. Persistent punching delayed recovery. When let alone, after proven, case recovered far more rapidly. Bit by bit, our conceits were being debunked.

This was thirteenth of our major steps in proving D. D. Palmer's theory.

One person who awakened us to a realization of the importance of debunking conceits was our Dr. H. C. Chance. He has been with us twenty-five years. Most of that time he has been Director of PSC Public Clinic as well as assistant dean of The PSC. For these many years he has been a very ardent advocate of Simon-pure, ten-fingered, by-hand-only, specific Chiropractic. In his capacity as Clinic Director, he has had charge of all student training on actual cases. He has seen hundreds of thousands of cases. He has thoroly relied on spinographic and neuro-calometer technic.

In that clinic he is called to check, verify, and correct all hand-used NCM readings of students. Few in our profession have seen or made as many NCM readings. Possibly with the exception of two or three others, he has had as much experience in testing the reliability of, or seeing as many NCM readings. He had reached that high and exalted conceit of his own opinion to where he honestly believed he was one of the two or three last words in the world, on accuracy and competency in seeing and thinking what the NCM needle delivered.

We suggested installation of the neuro-calograph in his clinic. Modestly, he thot it would not add more to his checking of students' work. In spite of this, WE had had as much experience as he; and if WE could be checked, it would do him good, also. In spite of his declarations, we installed a complete NCM-NCGH in his clinic, like we had in The B. J. Palmer private clinic. He looked askance at its use. He watched its work with certain misgivings. He checked HIS checks against ITS checks. It took him TWO MONTHS to make a complete surrender and abdication to its superiority. Today, he couldn't run that clinic without it.

This was OUR fourteenth major step in proving OUR theory.

Then came the electroencephaloneuromentimpograph which was one of the greatest forward research steps we made. This instrument measured QUANTITY flow of mental impulse supply between brain and body; with subluxation, without subluxation; before adjustment, after adjustment. This was vitally important, for after all was thot, said, written, printed, taught, or practiced, normal QUANTITY flow was health, REDUCED QUANTITY

flow was sickness, RESTORED QUANTITY flow was health. It proved the where and when of QUANTITY pressures and QUANTITIES of interference to flow; the where and when of restorations of QUANTITY flow following release of those pressures.

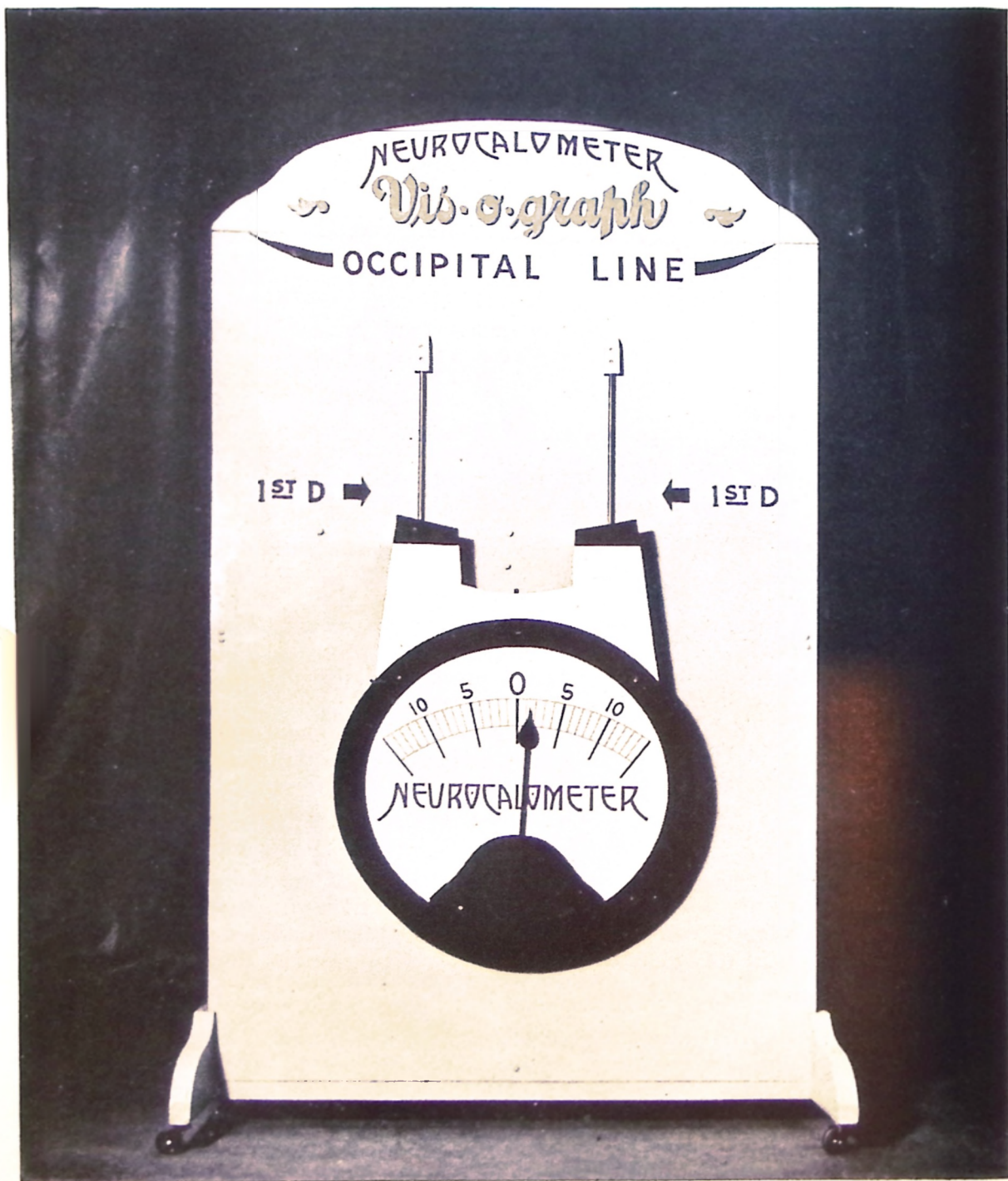
These eight simultaneous graph wave patterns proved there were NO pressures or interferences BELOW axis. It proved all were ABOVE inferior of axis. This further disproved our older concepts of the inferior meric system as far as it applied to possible subluxations. It proved whether we were right or wrong, whether we had or had not permanently released pressures and restored QUANTITY transmissions above inferior of axis or below inferior of axis. It proved that what existed ABOVE inferior of axis WAS a subluxation, when all four elements were present; that what existed BELOW inferior of axis were misalignments of vertebrae, with only the first two of the four elements present, the last two being absent.

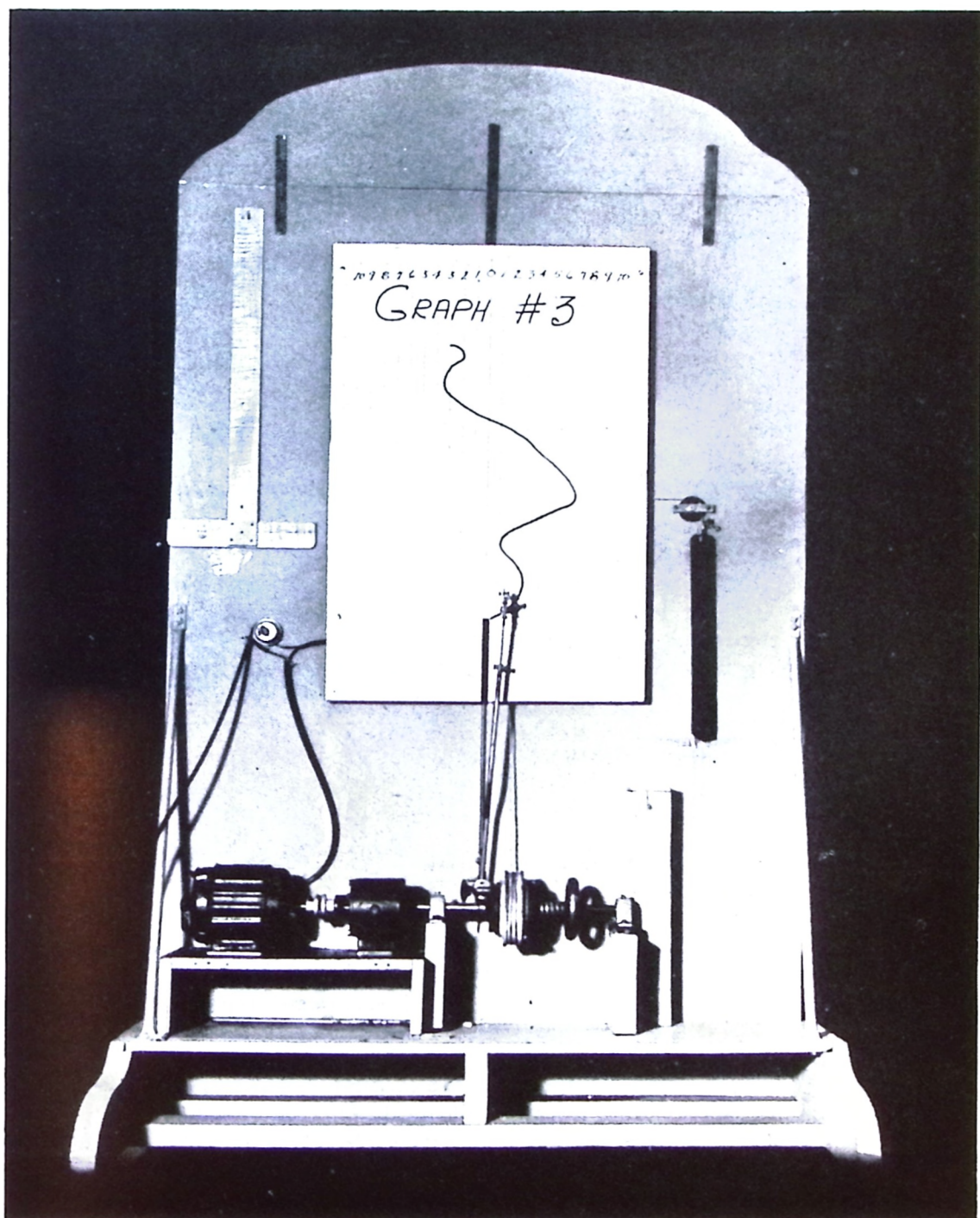
This proof eliminated many complexed variables and introduced new simplified constants. Our conceit of what we thought we knew was again riding for another reconstructed fall.

This was our fifteenth major step in proving D. D. Palmer's theory.

With all the research and our debunking our conceit occurring at Chiropractic headquarters, convincing us of certain definite conclusions, the profession at large continued satisfied in THEIR conceits, satisfied to practice the older order of work. Little we could say, do, or prove dented their ideas. They knew, and they knew they knew. What could we say, write, print, or do to convince THEM as we had convinced ourselves? We taught our students the new work. We held Pre-Lyceum classes and proved our contentions. What more could we do? There must be other ways!

Then, at Pre-Lyceum, 1949, came the Vis-o-graph, which was destined to fully and completely convince every person in attendance in wholesale lots. It is an amplified instrument that shows a NCM graph in the making. It is a NCM graph visually observed. (See illustrations.)





On front side of this 5' x 8' board is an enlarged front of a neurocalometer. The regular hand-used NCM is 3" x 5". This enlarged model is 2' x 3'. It reproduces exactly the front of the smaller NCM. Its face is the same amplified. It has same number of degrees, left and right, center zero. The swinging needle, instead of being one-half inch as in the regular ordinary model, is two feet long. The face of this enlarged model is perpendicular, facing the audience. It is large enough to be seen clearly and distinctly in any auditorium. By a motor attachment in the rear of the board, the amplified NCM travels superiorly at same ratio, distance, and speed of the regular NCM when held in hand of Chiropractor gliding up a cervical region, except it is synchronized to the same distance and speed amplified in ratio. As it travels superiorly, the full length of the cervical area from second dorsal superior, needle swings left and/or right, indicating mean line and break heat readings.

In rear of this board, attached to indicating needle in front, is a lengthened rod, at end of which is fastened a black crayon. On superior portion of rear of this board are sheets of plain white paper, 24" x 36". As amplified NCM on front travels superior, so does extended rod in rear.

Technician standing behind board, unseen by audience in front, grasps crayon in hand, and, as the rod and crayon travel superiorly, arbitrarily draws an imaginary cervical spinal reading on paper. Exactly duplicating this crayon graph drawing on paper in rear, is the swing of needle on front side of amplified NCM as it travels superiorly. We now have an actual crayon graph on paper in rear, of what we have asked each Chiropractor in audience to look and see what occurred on the face of the amplified NCM as the needle swung left and/or right, as NCM traveled superiorly.

Meanwhile, we passed out printed sheets to each Chiropractor. We asked each to mentally concentrate and visually observe what took place; then reproduce on paper with pencil, what HE THOT he saw with his eyes and his mind.

In the Pre-Lyceum (1949) we had 120 experienced NCM-users, many of them of many years. Each was convinced, certain, positive he saw what he was looking at on his patients in his office. He KNEW he was able to differentiate where and when he had meanline and break readings. He was sure he was adjusting when he should, and did not adjust when he should not, based on readings he THOT he saw. Was he?

After he had drawn his graphs on printed sheets furnished him, technician who had drawn enlarged duplicated graph on rear sheet took it off and showed it to the audience. They were asked

to compare what they had drawn with the actual original graph.

One or two had a fairly actual reproduction. Most all were way off. Lefts were rights; rights were lefts. Mean lines were breaks. Breaks were mean lines. Breaks were low when they should have been high. Mean lines were high when they should have been low. Many had NO mean lines OR breaks at all. One would think, from the graphs they drew, that many were cross-eyed, mental observations being upside down. They convinced themselves, more than anything we could have told, that their eyes and minds deceived them.

Scores of similar tests were made every day of Pre-Lyceum. As the course wore on, there was an improvement in accuracy. However, none were exactly accurate. These visual tests debunked their conceit completely. They TAUGHT THEMSELVES that they weren't as good, as accurate, as efficient as they thought they were. They TAUGHT THEMSELVES the necessity of a neurocalograph to eliminate the human error variables. They bought all neurocalographs in stock — and more.

Near the close of the Pre-Lyceum training program with the Vis-O-Graph, it was evident that the group, as a whole, had improved their ability to put down more accurately what they saw, and were ready to be tested on an actual case which required several graphs in chronological order.

- 1st. Establishment by the Vis-O-graph of pattern of interference.
- 2nd. Case given an adjustment based on interference pattern.
- 3rd. Pre and Post adjustment graphs compared.
- 4th. Reading taken day following adjustment, compared with original pattern.
- 5th. Reading taken three days later, again compared with original interference pattern.

It is to be remembered we here in this work were not directly concerned in the graph, except that it had to be an interference pattern before an adjustment could be given.

Before first graph was run, Pre-Lyceum group was told to record the pattern, which represented original interference pattern of patient.

A second graph was run, and after the group recorded this pattern, they were asked to determine whether or not in their opinion it resembled the first graph. The group agreed it did, and as a matter of fact, graphs had been drawn exactly the same.

At this point patient was given an adjustment.

A third graph was run, which represented a post check to the patient's adjustment, taken one hour after adjustment.

Fourth graph represented pattern of the patient the day following adjustment.

Fifth graph was the final graph of the series taken three days after adjustment.

When all graphs of this entire series were displayed, any conceit in anybody of this group was a thing of the past, as not one single person had been able to accurately record every graph as they were run. This proved beyond all doubt, that had this patient been in one of the one hundred or more Chiropractic offices represented in this group, he could not possibly have been given accurate readings, which many times determines the difference between success and failure.

The Vis-O-Graph has been used in regular PSC class work since Pre-Lyceum and it is interesting to review the progress of students.

The first class to have regular class work with Vis-O-Graph instruction was a freshman class just starting NCM training. These students had been given a very thoro training in visualization by Dr. Himes before coming to NCM class. The students were quick to pick up graph recordings, as they were free from any previous bad habits of previous training in building up their conceits on what they thot they saw.

At the end of two weeks of class work, they were given an exam on graphs. More than 80 per cent had all 10 graphs accurately recorded.

This same course was then tested on Fourth Year class who had extensive hand-used, eye-observing NCM training prior to the training with the Vis-O-Graph. Less than 40 per cent were able to duplicate what they saw on the same 10 graphs. Bad habits of conceit had been trained into this group.

From this comparison of training with and without visualization instruction, it was obvious that our minds get into a state of confusion and we have builded a conceit thinking we can and do see what we look at. Much must be undone. We must bring ourselves to face the reality, or go on kidding ourselves.

The Vis-O-Graph has changed the course of our training and students' thinking more in one year than opinions ever could have done. Conceit cannot stand against cold, hard facts.

Not only are these tests true to OUR profession of Chiropractors who use Chiropractic instruments, who use eyes and minds to see NCM readings, but they apply with same force to use of any other instrument where same eyes and minds think they can and do accurately and efficiently record what needles of other instruments deliver in readings. Conceit is not found only with NCM users, because the conceit is not in the instrument but in the individuals. In seeing WHAT THEY THINK THEY SEE, they deceive themselves regarding what they THINK they see and do. This is true of ANY instrument where a fluctuating needle indicates a record which the human eye is SUPPOSED TO SEE, WHERE THE HUMAN MIND IS ALSO SUPPOSED TO accurately remember what it inadequately interprets.

Some needle-indicating instruments have variables in their pick-up; some have them in the recording mechanism; some have them in both pick-up and recording. Add these to the variables of the eye-looking and mind-interpreting individuals, and you have a sloppy, inefficient, inaccurate approach to locate subluxations or prove their adjustment. Ignorance of the existence of variables in instruments or themselves, creates a false confidence in instruments and themselves. This IS conceit of the worst type.

This invented and patent-applied-for Vis-O-Graph has debunked more wholesale conceit in our profession quicker than anything we have developed for the betterment of Chiropractors and their service. To us, however, it verified that which we have known and used in The B. J. Palmer Private Research Clinic for past sixteen years on ALL cases, which accounted for OUR step-up in results in a larger percentage of OUR cases over THEIR cases; getting results on their problem failures which they referred to us.

This was sixteenth of the major steps in proving D. D. Palmer's theory.

The next step in the development of this Vis-o-graph seeing what one was looking at, and debunking what one didn't see that he was looking at (which was brot about after Pre-Lyceum) was to draw a duplicate carbon graph reading on TWO white sheets on the rear board. One of these was then placed in front, alongside the amplified NCM. Technician went thru motions of retracing the original graph drawing on his original drawing on first rear sheet on rear board. Chiropractors were asked to watch needle of amplified NCM as it traveled superiorly and compare it with carbon copy alongside, to see if they could agree that what they saw were equal to each other.

It was an excellent way to train eyes and minds to see what they

saw. It was also an excellent method of proving to themselves how to debunk their conceit on thinking they DID see what they saw.

This was seventeenth of the major steps in proving D. D. Palmer's theory.

A classic example of what we are trying to portray and prevent is:

Assume two autos have a smash-up. There is only ONE crash with ONE series of things happening. Assume there are 20, 120, or 500 people looking, seeing, and interpreting what happened. Will all or two agree? You know they can't or won't. They can't or won't agree within one hour. Spread time between hour of accident and day of the damage trial, by weeks or months, and discrepancies enlarge and multiply. Memory is a fickle thing, whether it applies to an accident on NCM reading. Obviously, it happened only ONE way to all. Obviously, we have two or more people who see, think, speak, and will testify under oath different from each other. The differences are in backgrounds, educations, understandings, observations, thinking values, and in honest conceit of what they think their ability is. To secure a motion picture recorded graph of the event PROVES what happened and would debunk conceit of each person in some of many inconsistent, inaccurate details.

To further our theory that the mass of people are conceited in thinking they see what they look at; and in our further desire to produce graph evidence which permitted them to debunk their mental conceit, we secured a flash projector with flash illuminations of numbers on a screen. Each was asked to be quiet and concentrate, see the numbers, and write down what he thot he saw.

1st. We flashed a series of THREE digits at one-twenty-fifth of a second. We gradually increased this series to five and six digits at the same speed. In this series there wasn't one out of 120 that got each number of digits correct. This was repeated for two days. Gradually, their percentage of accuracy increased but none got ALL in a series correct.

2nd. After two days, we flashed a series of three digits at one-thousandth of a second. We gradually increased this series to five or six digits at this speed. In a series there wasn't one out of 120 that got each number of digits correct. This was repeated for three days (to the end of the week's work) but none got all in a series correct.

You will ask: What had this eye-testing and mind-recording and hand-writing to do with NCM readings? As NCM glides superiorly over neck, needle fluctuations are constantly changing and varying,

demanding INSTANT eye testing and mind recording of what needle is revealing.

The tests convinced all that it was THEY who were vulnerable, not the subluxation, pressure, interference, resistance, the NCM, or its accuracy.

It is a known and accepted fact that the process of learning is largely a process of unlearning. The problems of Chiropractic analysis are unknown to the freshman student; he has not learned what they are. Therefore, the freshman is trained to develop a form, a principle of technic in the art of visualization, that when fully conceived and applied, enables him to solve the problem with a much greater degree of ease when it does arise. This approach is analogous to training the golfer to develop his perfect swing long before he is permitted to use that swing on a golf ball.

This was eighteenth of the major steps in proving D. D. Palmer's theory.

Why do we have thermometers, yard sticks, tape measures, microscopes, telescopes; pints, quarts, and gallons; bushels and hogsheads; clocks and scales; dollars, halves, quarters, dimes, nickels, and pennies; meters of all kinds? If we didn't, every man would be a rule-of-thumb of his own — no two agreeing. Each would conceitedly be a genius by himself, and utter confusion and discord would exist.

The U.S. Government has a Bureau of Standards to regulate all standards, which debunks the conceit of men's differing opinions. The neuro-calometer and neuro-calograph are the Chiropractic standards.

The fundamental conflict today, between Chiropractic principle and practice and medical principle and practice, is between a mechanistic concept of man or whether he is entirely chemical; whether the mechanistic issues chemical as a by-product or whether all begins and ends with chemical.

Behind all normal or abnormal, natural or artificial, healthy or sick, mechanistic or chemical man is the necessity for a normal rate of speed of motion, without which the machine could not run to produce chemical products. Behind all motion is power supply to contract and relax muscles to produce motion. Behind power supply is nervous system which conveys power to and fro. Behind nervous system is the brain generator to absorb, condense, and concentrate an Innate Intelligence without which there would be no mechanistic motion or chemical products. If all channels are free and they convey normal quantity of energy flow, all move-

ments will be at a normal rate of speed, a condition called ease, not dis-ease.

There is a tendency of some of our good men to sideslip into the chemical diagnostic field, to locate subluxation by analyzing symptoms and pathologies. This takes them from correct analytical facts. Innocently, this leads them from Chiropractic into field of diagnosis which they believe to be a correct subluxation analysis. Instead of directing them to right place, right direction, right time, right way, it draws them away from it. Given time, they find a drop in percentage of results and then return to the fold they never should have left.

Recognizing this factor of human inefficiency, every instrumentation in The B. J. Palmer Private Clinic automatically and mechanically graphs and records its findings. Our conceits were completely debunked sixteen years ago. It takes 128 printed forms to complete our case files. We have been using this process of securing case data for sixteen years on thousands of cases. Our case files are undoubtedly the most complete and accurate of any clinic in the world. It is this kind of case record which now makes possible a break-down research analysis of what Chiropractic does to restore health to the sick. Our research department is compiling this information on each phase of our work, in individual booklets.

All this debunking of our conceits eliminated variables and established constants. The result was a SPECIFIC cause, SPECIFIC vertebral subluxation, SPECIFIC deductions, SPECIFIC facts, SPECIFIC adjustment, SPECIFIC location, SPECIFIC results. This series of processes established scientific knowledge and debunked theories.

People differ in the number of, character of their conceits to which they cling. Many have many. Some have less. Others try to have none. Some refuse to let loose of those they have. Others research to lose them. Those who have conceits are like leeches — they suck the progressive life from the hosts upon which they feast. Some love conceits. Others despise them.

We kept losing our conceits, one by one, year by year. We know much more now than we did then; but by so doing, we knew much more then than we do now, as paradoxical as it sounds. Most of what we lost was not so. We know much less now than then — much of which is true.

What does the future hold for us? Let us hope much more of what has happened in the past — conceit disillusionment.

This debunking of human conceits is not new to you or us. It has been going on since the dawn of human progress. It will

continue as long as there is a necessity for evolving from inside outside of ourselves. Only by this method can we change human chaos to a better human service.

The Story Of ARMISTICE DAY

What would you do? What would you think? Would you try to evade or avoid your patriotic responsibility? Would you turn conscientious objector? Would you feel you were justified in placing your convictions above that of your country?

These were a few questions we had to face during World War I.

We were of soldier age. The draft was on. We were in the fifth draft. Draft by draft came; names were drawn; men went. Ours was getting nearer. What to do?

Here was our problem: All our life had been spent SAVING human lives; adding years TO lives; relieving suffering; doing that which mended sick people; reducing pain. In our younger days we had done some hunting — ducks and big game. Once we shot a deer, wounding it. As we came up to it and saw those big soft pleading eyes looking up at us from the deer we had wounded and not killed, we then and there said, "Never again will we shoot any live thing."

Yet the day was drawing close when we were going to be drafted to put on the drab, shoulder a gun, get in the trenches, take pot-shots at men we had never met and had no animosity against, who were philosophically our brothers; and we would be asked to shoot to kill, to maim and injure, create pain and suffering, blow off their heads if possible. Could we?

It was a long far cry from SAVING lives to KILLING lives; from finding and adjusting the cause of dis-ease to shortening years of men we faced. Could we revolutionize our thinking to justify? Could we do this over night, so to speak? Could we reverse our lives and right-about-face? The more we thot, the more repugnant the idea grew. What to do!

As the fifth draft drew near, we saw an out. Make application as an overseas YMCA war secretary. This would serve a war purpose, be behind the killing lines, serving and HELPING men rather than HURTING them. Our application was filled and sent on its journey with hopes it would be accepted.

Then came Armistice Day. THAT DAY our application WAS accepted. THAT DAY we received our commission to report for duty as an Overseas YMCA Secretary. Truly, it WAS armistice for us.

Again Innate Intelligence had worked her plan to save us for the right to continue as we had always done up to that date; to

continue to SAVE human lives. Thank you, again and again, Innate! You certainly were a friend to mankind once more. Who says there isn't a law at work?

The Armistice was signed at 11:00 a.m., November 11, 1918. On September 10, 1918, we were 37 years old. Since then, to date of this writing (1950) we have been spared 32 years to continue our great, good, and glorious work of SAVING human lives. What greater epitaph could any man desire than that it be said, "Because of his having lived, he added millions of years to millions of lives"? We are not sufficiently conceited to think we alone did this; but thru us, to our graduates, to their patients, this has been accomplished.

Speaking now, by retrospection of two World Wars, recall the figures of that first Armistice Day—ELEVENTH month, ELEVENTH day, at ELEVEN o'clock. Let us quote the prophesy—if it can be so called—of the Bible. The ELEVENTH book, ELEVENTH chapter, and ELEVENTH verse says:

11. Wherefore the Lord said unto Solomon, Forasmuch as this is done of thee, and thou hast not kept my covenant and my statutes which I have commanded thee, I will surely rend the kingdom from thee, and will give it to thy servant.
I. Kings, XI:11.

The Story Of SMALL THINGS

(In THE BIGNESS OF THE FELLOW WITHIN, Palmer, Vol. XXII, 1949, is a lengthy article dealing with INNATE INTELLIGENCE as it personifies itself in living man. This is an enlargement upon another phase of Innate Intelligence as exemplified in other living composite units.)

In the animal kingdom are ants, bed-bugs, mice, rats, cats, dogs, cows, horses, on up to all wild animals.

In jungle countries, we have seen "ant runs", marching sixteen abreast, miles long, with perfect precision, like a drilled army. They walk up one side of vegetation, down other side, leaving it stripped. They will attack living animals — such as cow or horse — walking up one side, down other, and in an hour leave only bones.

Among flying creatures there are mosquitoes, house-flies, humming birds, canaries, robins, pigeons, eagles, etc. Humming birds fly up, down, forwards, and backwards. Aeroplanes, made by man to imitate birds, fly forwards, up and down, like the helicopter. None is able to fly backwards. Birds fly tremendous distances without stopping to drink, eat, or refuel as aeroplanes are compelled to do. Aeroplanes are guided to destinations by man-made compasses. Birds have an automatic gyro compass, inborn at birth. The homing pigeon is an example.

Millions of bats, flying thru an impenetrable blackness of caves, towards and from each other, between stalactites and stalagmites, miss all obstacles because of an inborn internal radar system. Man has none such, proving that Innate in a bat knows and builds more and better than education in man permits be done in man. Some men never get lost in woods or jungles. Others go round in circles and are always lost, proving that some men permit Innate development in themselves, whereas others deny its existence.

Buffalo, native cattle, wolves, when attacked will back their rumps together in a center circle — heads out, to defend themselves against storm or attack.

Mice, rats, cats, dogs exhibit intelligence in evading pursuers and in pursuing prey. Their sense of distance, timing, direction, sight, smell, and hearing is exceedingly keen. Their ability to sustain energy over long distances is prodigious and appalls man.

'Tis said "an elephant never forgets." He possesses great powers of pulling and pushing great loads and tremendous lifting power

with his trunk — such as lifting trees, which we have witnessed in Burmah.

There are fish from microscopic size up to whales. Explain how salmon born in a certain small tributary of a fresh water stream will go down that river, out into salt water ocean, stay away four years, gaining size, return to that same mouth of same river, swim up that river to that same small tributary, fighting against great hazards to get there, spawn at same place where it was born, and then die. Where was the fish those four years? Why does it leave fresh water and go to salt water? How does it know the same stream after four years? Turn a human baby loose at the same age, under same circumstances, and it would perish in forty-eight hours.

Bovines, felines, canines, insects, reptiles, etc., all have eyes and see, ears and hear, mouths and vocal cords to speak their language, skin to sense feeling, mouths to ingest food, alimentary tract to swallow, digestive system to absorb food, urinary system to eliminate solid waste materials, muscles with which to walk, run, fly, pick up food — like squirrels with their hands or dogs with their paws — crawl, as do snakes; vocal cords to cry, as the moo of cow, whinny of horse, meow of cat, bark of dog, etc., thus expressing pleasure, displeasure, or pain.

What function has man that animals, birds, reptiles, insects do not have? What additional senses have they, that man has not? What functions have many more highly developed than similar functions in man? How explain them? What has man that they have not? What do we think of monkeys in the zoo? What do monkeys think of us outside? All have an Innate Intelligence, acting the same, performing the same internal functions for living, and internal-external functions for environmental contact.

If skin is burned, it heals; if a bone is broken, it unites; if flesh is cut, it heals — all done by an internal Innate without man's external interference. Let man burn his skin, on comes dope on the outside. If a bone is broken, he may use surgery to peg the segments. If flesh has an abrasion, he applies drugs on the outside to heal it. Why?

Man is a large animal, compared to an ant, humming bird, fish, yet the smallest of these has the same systematic construction of organs, viscera thru which flows function, the same as in man.

So God created MAN IN HIS OWN IMAGE; IN THE IMAGE OF GOD HE CREATED HIM. He created both male and female. Then God blessed them and God said to them, "Be fruitful, multiply, fill the earth, and subdue it; have dominion over the fish of the

sea, the birds of the air, the domestic animals, and all the living things that crawl on the earth!" (Genesis 1:27)

So "God made man in HIS own image" which personifies the presumption that GOD WAS and IS a HE or HIM man. The ants, flies, bugs, butterflies, insects, reptiles, etc., NOT being man, thereby presumably were not made "in the image of God." WHO or WHAT, then, DID make them? Did they just come and grow like Topsy, not coming from egg, seed, or sex, and thus ignored all creative law, merely because MAN thinks HE alone, of all creatures, is THE ONLY creation created by God? Did all other living things, including vegetables, animals, flowers, just happen; were they accidents, freaks, monstrosities in violation of law? Or, is there a Universal Intelligence which produces and reproduces ALL living things according to a natural, immutable law, even tho man's observation is contrary to man's religious education? WHY aren't ALL things created "in the image of God"? Oh ye of the KNOWLEDGE of a mustard seed!

Could man's education — be it scholastic or religious — build an ant, fly, mosquito, or any other of the small animals that inhabit earth? Could his college or seminary education build any small part and cause it to function? Yet, when it comes to man, HIS EDUCATION takes precedence, becomes the sunnom bonum, the multum in parvo, the omnibus of all interpretations. He THINKS he knows what man is made of, what man is, how to run him inside and outside in each part and all his parts. He directs his diet, he plasters on the outside and injects on his inside, elements HE thinks HE NEEDS to get well, to run normally.

What is IT which runs man when he IS healthy, normal; when he gives little or no thought to what to do, to eat, to keep well when all IS well. Let that man get sick, when the mechanism goes haywire, and the entire procedure changes. When he is well he is run by an INSIDE intelligent force. When he gets sick, he thinks he must be run by an external education formula, individually and empirically concocted, taken out of books or within the constricted walls of college.

The outside-of-us world knows scavengers are a necessity to balance living and dead matter. Let man get sick, and the inside-of-us scavenger germs become THE CAUSE of disease within us. Why turn the natural world outside-of-us topsy-turvy, into an unnatural and abnormal world inside-of-us? Why speak truth about germs outside, and lie about them when found inside?

A wall clock is large, compared to the smallest wrist watch the size of a dime. We think of man who made the smaller watch as

a skilled artisan requiring infinite patience, detail, and a masterly touch. What about the skilled artisan — Innate Intelligence — which gives birth to, builds, and functionates in a mosquito, humming bird, or fish everything that big man has?

Now comes a human baby with NO "education" per se, at birth. How come IT was builded, given birth, handicapped as it is, as against the abilities of practically every other species and family? As it "progresses" thru future years, it picks up impressions from environment, interprets them, accumulates and sorts them into separate categories — each to its kind — lays them away for future reference; does this from birth to death, a matter of a few short years compared to the eons of time. He BUILDS an education, brags about what he thinks he knows, and yet with it all he can't make a baby boy or girl, lay an egg, hatch a fish, fly by himself, know directions, and he gets lost in the woods. What he thinks he knows he boasts about and places on high pinnacles as the ne plus ultra of understanding of himself and the universe.

The mosquito is a manufactured product containing everything physical man has, plus some mental attributes man would like to have. The producer of THAT product is infinitely greater than the education of man; yet no greater than the same producer that made the man product. All of this proves that the producer OF ALL THINGS is as great in the animal kingdom, large or small, as in man. Educated man calls this producer under the crude names of "nature", "instinct", "intuition"; "sub-conscious", "non-conscious" or "un-conscious" mind. Scientifically trained man calls it, physiologically, "sympathy" and "reflex action" in functional living man working thru a "sympathetic nervous system", the "solar plexus" or "belly brain" or thru the "autonomic nervous system" which is as near as he dares educationally allow himself to say it is an "automatic" system, without acknowledging a superior intelligence outside the realms of his so-called physical sciences.

Left to themselves, under natural normal conditions, species will not cross-breed. Bovines will not breed with equines; felines will not breed with canines, etc. Under educated fools' commands, they may be forced to do so. If, as, and when such issue, they are hybrids and Innate stops reproduction. The mule is a classic example.

Left to themselves, under natural normal conditions, families of species can and often do inter-breed — such as the catto-buf; cross strains of families can be developed. Under artificial sex stimulation of man, the black can breed with whites; reds with yellows; one nation with another — such as Esquimeaux with Americans; Chinese with Patagonians; Indians with Japanese; but it's always

the same family — the genus homo sapiens. A mixed nationality exists but the species is not mixed.

You raise the question of the productions of Luther Burbank (See The Story of Luther Burbank, in THE BIGNESS OF THE FELLOW WITHIN, Vol. XXII, Palmer, 1949). The "secret" of the work and works of Luther Burbank was that he "robbed Peter to pay Paul" from one family to another, or in the same family. He could no more cross species artificially than Innate Intelligence does naturally. If he did, he produced a hybrid and it died then and there for want of following Innate's law of reproduction.

Natural products must be bred to natural products to reproduce natural products. Try to cross-breed a natural to an artificial, and you get a hybrid which is sterile from there on.

The natural is simple. The artificial is complex. The hybrid is impossible. The natural can reproduce and duplicate itself. The artificial cannot reproduce or repeat itself. The hybrid is dead to begin with.

When we know Innate we have solved all natural life problems. To know Innate is to find no place for diseased artificials. We then realize there is no place in any scheme of things for hybrid treatments that attain no natural result.

Medicine is a bastard attempt to cross-breed an Innate natural normal species with artificial abnormal species of various kinds. The result? Hybrid failures to get sick well.

Many Chiropractors, we regret to say, are attempting to travel the same impossible split highway. They work ON the natural product of one species — man — with the products of all other species (be they mice, rats, cats, dogs, cows, or horses) thinking they can produce an unnatural hybrid called health.

They buy, merit unknown, gadgets, thingamabobs, devices of various diagnostic and treatment methods. Many other wise men try to cross-breed Chiropractic and medicine, ruining them in the attempt.

To know Innate is to know the natural. To ignore Innate is to know the artificial. Deny both natural and artificial and you know hybrids.

To know Innate is to nurse at the breast on mother's milk. To ignore Innate is to suck on the bottle of malted milk. To play with hybrids is to dilute vitamin pills.

Chiropractic is an interpretation of natural law. So long as Chiropractors work WITH that law, the law will work WITH them.

So long as Chiropractors work with species and families of species, they attain the ends pre-destined and fore-ordained by the law of that species and those families. The moment they TRY to cross-breed Chiropractic species of natural law with artificial medical interpretations of that law, they produce hybrids which automatically fail to get the sick well.

In our fifty-four years we have seen attempts at cross-breeding of Chiropractic and medicine; of adjustment of cause and treatments of disease; restoration of function with stimulation and inhibition of medicine; Innate of man from within against by-products of vegetables, animal and mineral products from without; simple constants opposing monumental and multitudinous complexities of variables; approaching the problem of analysis as against the endless impossibilities of correct diagnoses. We have seen diagnostic instruments come, thrive for a while, and go. We have observed systems, moves, and fantastic evasions of all kinds prosper for a while under stimulated desires, and die withering in action for the want of reality of substance in them. We used to expose them to save our profession. Today, we leave that for Innate to do, knowing no man has the power, ability, or intelligence to frustrate the dictates of natural law. The sooner our profession realizes this, the sooner it will prosper; for there is only ONE way to get sick people well — not many. To get sick people well is to reap the rewards of a harvest justifiably garnered.

The Story Of THE WRONG BELL

Personnel:

Dr. Ethel Morrison, P.S.C. Graduate Chiropractor, now practicing at 509 Madison Avenue, New York City.

An unknown man, injured in automobile accident.

Roosevelt Hospital, which refused to accept the injured man.

"Mrs. Dodge", who saw that they did.

Mrs. Marcellus Hartley Dodge, the good samaritan, daughter of William Rockefeller, brother of John D. Rockefeller, Sr.

"Patti" (Mr. Patterson), Major-domo of The Giralda Farms.

Giralda Farms.

Yours truly, B. J.

This episode happened years ago. Memory being fickle, some details may be fickle also.

Dr. Morrison who was then practicing on East 34th Street, had a patient. So far as she knew, the patient was "Mrs. Dodge." Dr. Morrison's office was upstairs, second floor, facing the street. Waiting for her turn to be checked, was "Mrs. Dodge."

Downstairs, in front of Dr. Morrison's office, there was an automobile accident. The man was badly mauled, fractures, lacerations, bleeding. Looking up, people saw the sign "Doctor", so they brot him to her office. Not being a surgeon, Dr. Morrison called the Roosevelt Hospital to send their ambulance after the man. They refused — he being unknown, they not knowing whether or not he could or would pay his bill.

"Mrs. Dodge," overhearing the phone conversation, inquired. Before Dr. Morrison signed off, "Mrs. Dodge" said: "Let me talk to the hospital, please."

This is about what was said: "Roosevelt Hospital? This is Mrs. Marcellus Hartley Dodge. I want you to send your ambulance at once for this injured man." Surprised at hearing the name, the hospital lost no time in sending their ambulance.

After concluding the conversation, Dr. Morrison inquired: "Who are YOU, that they acted at once upon your order?" "Mrs. Dodge" replied: "They should, because last year I donated a half million to their hospital; and if they hadn't they would need give me a reason, and I should have demanded an explanation."

All of this shows that even in New York City one doesn't always know his next-door neighbor, especially when worthy people hide their lights under a bushel.

Dr. Morrison was the family Chiropractor to the Dodge family, later living in a cottage on their farm in New Jersey.

On one of our occasional visits to New York, Dr. Morrison spoke to Mrs. Dodge. We were invited to spend a week-end at Giralda Farms. We took a train to the New Jersey station, were met at the depot by "Patti", otherwise Mr. Patterson. We arrived Friday afternoon.

Saturday morning was when "The Wrong Bell" entered the picture.

Retiring Friday night, after checking and adjusting the Dodge family, we decided that early Saturday morning we would go out to see these internationally-famous Giralda Farms before breakfast. There was a greenhouse with flowers, stables with riding horses, kennels with those pedigreed dogs for which Mrs. Dodge is known everywhere in dogdom, the swimming pool, etc.

Waking at 5:30 a.m., taking our shower, we looked around for our clothes and shoes. No clothes and no shoes anywhere. We concluded quickly and wisely that the valet had come during the early morning hours and had taken the suit to be pressed and shoes to be polished.

By the door were FOUR electric switches. Which one rang for the valet? We figured each was for electric light. Over on the davenport, on another side of room, was a white silk cord with a push-button. This one must be for the valet. We pushed it, and INSTANTLY all hell busted loose. It set off two huge electric bells, one upstairs on bedroom floor, one downstairs on living floor. IMMEDIATELY, from all rooms, rushing into halls, came other guests in bathrobes, etc. The Dodge family came running out. The night watchman came rushing in from outdoors. Everybody inquired: "WHERE'S THE BURGLAR?" It seems that the entire house is wired for burglars and WE HAD PUSHED THE WRONG BELL.

Very much embarrassed, we admitted our mistake, apologized, made explanation of what we wanted and why. Our clothes came quickly, we dressed and set out to visit the farms. .

Later, at breakfast, our blunder was the topic of conversation, at our expense.

We enjoyed our visit tremendously. We enjoyed knowing the Dodges. Our blunder turned out to be a method of getting better acquainted, even tho unintentional. Next time, we shall inquire as to which button does what to whom, before we retire.

**The Story Of
KA PU U – PAA
(The Virgin)**

This figure was so named because THE VIRGIN IS UNADORNED AND UNASHAMED.

Artist: Fritz Abplanalp, Instructor at Kamehameha School for Boys, Honolulu, Hawaii.

So far as artist knows, there is no other like it. This is the first and only such he has carved.

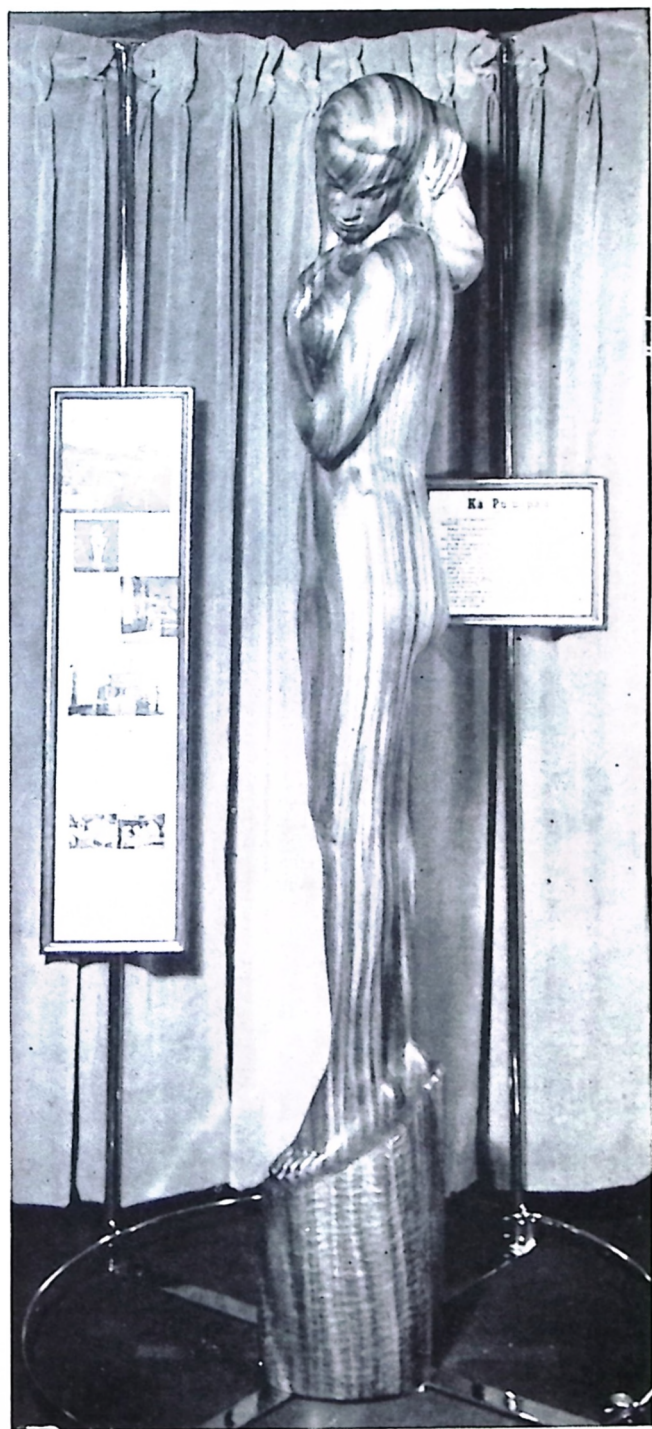
Artist began statue in 1939. Took three years. It was carved out of a monkey-pod log, nine feet long, three feet in diameter. Estimated weight of original log, two tons.

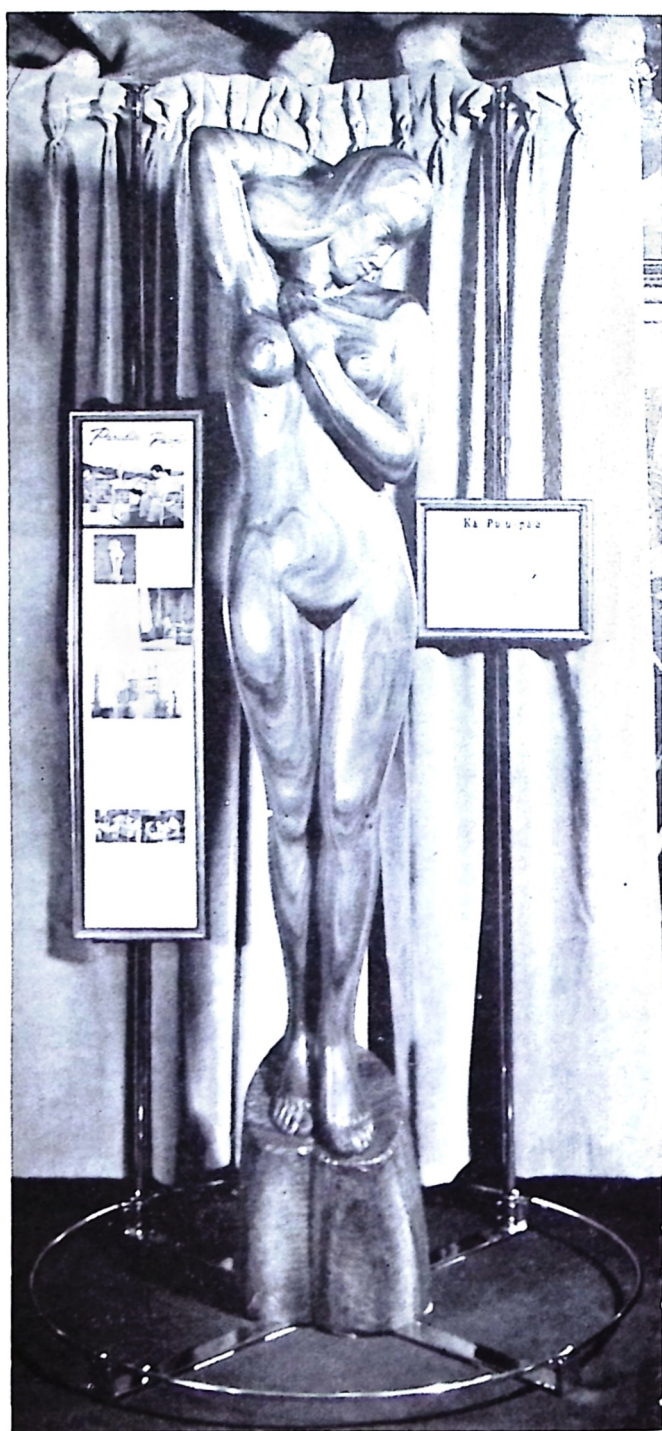
Note how artist worked grain of tree in circles of breasts, and outline of lighter wood on back.

Small holes are knot-holes which are holes.

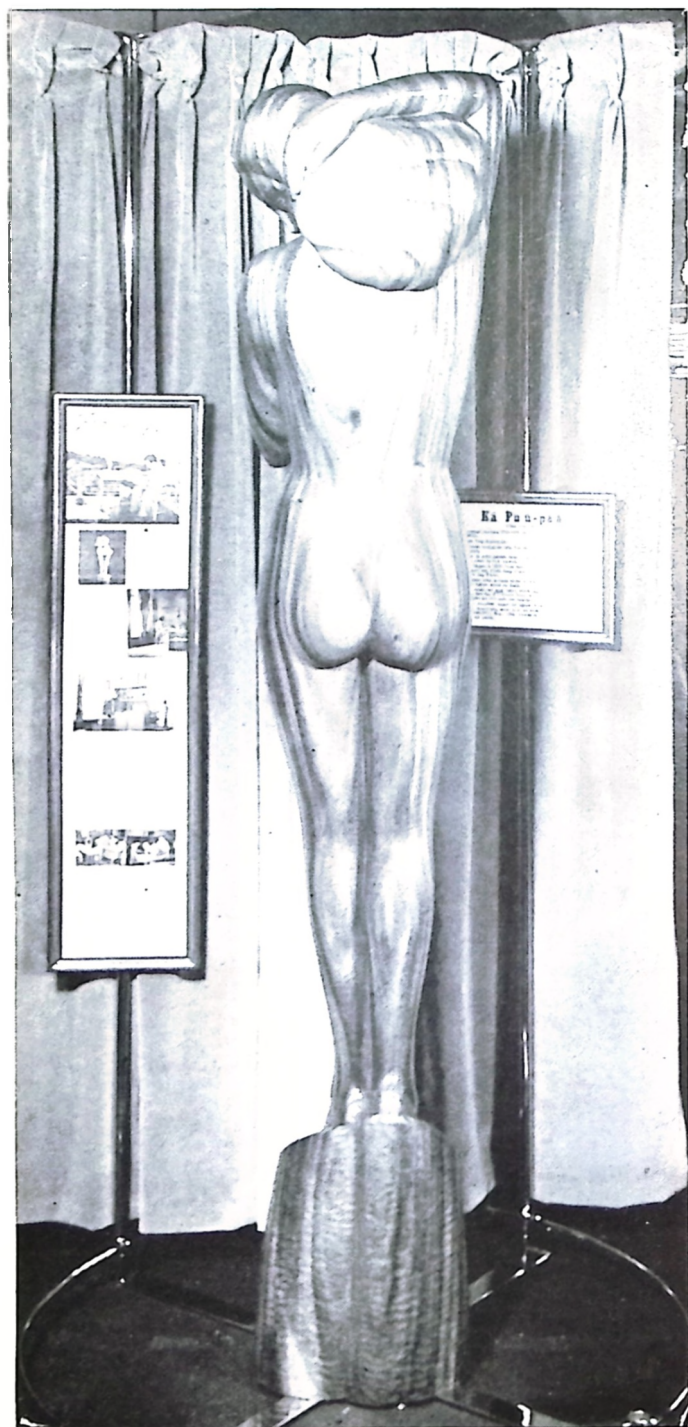
It was facetiously remarked that the United States Health Department would not permit the Virgin's body to enter the United States until she had been vaccinated and inoculated.

Artist's daughter posed for figure lines.









The following article, describing artist and his work, appeared in PARADISE OF THE PACIFIC magazine, November, 1948:

Fritz Abplanalp
Artist From Switzerland
By John Field Mulholland

A little ad in a Swiss newspaper was the initial step in bringing one of Hawaii's outstanding artists to Honolulu. To the eighteen-year-old Fritz Abplanalp, the ad seemed to offer an unbelievable opportunity. The Episcopalian Convent of the Transfiguration in Glendale, Ohio, wanted to hire a woodcarver who would be willing to live and work in Glendale. The offer promised passage to America, living expenses, and one hundred dollars a month.

With eagerness, he answered the advertisement, and an appointment was made to examine his work. After a time, the committee arranging for the woodcarver informed the youthful Mr. Abplanalp that he had been selected and that he would be hired for six years. There was a challenge of a type which would have appealed to a medieval craftsman. The Sisters of the Convent wanted the interior of their chapel finished with fine wood carving. The quality of the work was all important and the time consumed was not.

But complications arose with the immigration authorities and almost two years passed before Abplanalp left his home in the Swiss Oberland. During that time he worked to perfect his skill. At times he would talk over his plans with his fiance, Fraulein Elizabeth Maeder. But at last, in the spring of 1929, he came to Glendale.

There were times when the Swiss youth was lonesome in the new country. There were times when the different opinions of the thirty-five Sisters distracted him, but for the most part he had complete charge of planning and executing the carving of the chapel. Week followed week, and month followed month, and the chapel became increasingly the joy of the artist and the worshipper alike. One entire year passed when he worked upon nothing but the carvings of the choir.

After two years of work, he decided to ask Fraulein Maeder who waited for him in the village of Schwanden to come to America. The chapel which had been his joy in working was also to be the place of his wedding. The Abplanalps were the first couple married in the convent chapel. They remember how wonderful everyone was to them, to the Swiss boy who carved so men praised God, and the Swiss girl who had come to America to be with him.

The six years passed quickly, and the skillful youth had become an artist with certainty and power in his work. In 1935, the S. and G. Gump Company, art dealers of Honolulu, brought Mr. Abplanalp to Hawaii. A new phase had entered his life but here again he had the joy of working under direction, but with artistic freedom of design and execution. His work was of two types: He designed and carved wooden objects of art for the general tourist trade, and he worked on special orders.

An example of his influence shows that virtually no one in the Islands has escaped the impact of his work. Mr. Abplanalp was the first artist, not only in Hawaii but also in America, to design and carve wooden containers for perfume. The designs which he created for Gumps were imitated until virtually no one remembers that this accomplished Swiss wood carver was responsible for an item now regarded as distinctly Hawaiian.

Gumps offered an opportunity to the young artist of the widest possible field in carving special orders. Many local homes were decorated by Gumps and if there was wood work, panels or furniture, these were usually designed and carved by their wood-working artist.

The years from 1935 to the outbreak of the war were ones of increasing creative work. Mr. Abplanalp became a member of the Association of Honolulu Artists and exhibited in the shows at the Honolulu Academy of Art. His first exhibit was in 1937 and two years later he won the grand prize with his statue, Hiiaka. After receiving an honorable mention in 1940, he won the grand prize again in 1941 with his statue, Offering. Both statues are examples of using the lines of the wood in the contours of the statues.

The war brought an immediate end to the tourist trade and, like everyone else in the Islands, the Abplanalps were affected by the great changes brought about. In 1942, he joined the staff of the Kamehameha School for Boys. He soon showed that he was a natural teacher, but after all, patience and clearness of vision in carrying out a purpose are as much a part of a teacher as an artist. He teaches wood-carving and also drafting or mechanical drawing. He says that the secret of good art is good draftmanship and the ability to design is simply the ability to visualize, so he is very exacting in the drafting classes. He not only teaches carving to older boys, but has craft for the boys of the lower grades. This year he is also teaching a group at the Preparatory Department of the Kamehameha Schools, believing from his own experience that a boy of eleven or twelve is old enough to be taught the handling of tools.

As a teacher, he takes great joy in the accomplishment of the boys. When the Chamber of Commerce consulted him about a suitable wood carving to present to the Captain of the Lurline on her first voyage, he showed the committee the work of one of his students. The men selected the tray which Albert Silva had carved, and had Albert present the tray to Captain Johnston of the Lurline.

In diminished volume he has continued to carve by special order. A screen for Fort Shafter Officers' Club, a lecturn and a font for the Fort Shafter Chapel, a set of eagles for the Navy Hospital at Aiea, are some recent work for the armed forces. During the past summer, Miss Theo Redwood, a doll collector of New York City, commissioned him to make a small reproduction of an ancient aumakua for her collection of dolls. Orders for carved wooden screens, for a dedication tablet for Queen's hospital, for trays, for lamps, for decorative costume jewelry keep coming to him.

At times he wishes to forget his teaching and his carving and then he is apt to go fishing, for he is an enthusiastic fisherman. Occasionally he goes deep-sea fishing, but surf-casting is his chief hobby. It is this latter which has brought him his latest artistic inspiration. On his fishing trips he has seen driftwood, bleached, and salt-stained. The various shapes of driftwood suggested bits of sculpture to him. Many pieces needed only a little carving and by blending the bleached driftwood with carved design, striking miniature bits of art were created.

But his greatest joy in woods is still monkeypod, which he rates as an all purpose wood. He likes milo and hau for special types of work. About a year ago he purchased a number of logs of sandalwood on the Big Island and cherishes this traditional Hawaiian wood very highly. On work with inlay designs he has used the whiteness of coffee wood. The native Hawaiian woods are best, but he has worked a little with foreign woods such as the purple heart wood and the other rare and exotic woods.

In his use of materials and in his love for the Hawaiian people and for the islands, he has found not only his work but much of his inspiration. A Hawaiian war-god, a spray of shell-ginger, a hibiscus blossom may be the inspiration but it is Hawaii speaking through the skill of a Swiss woodcarver. Most of the time there is little suggestion of the Swiss Oberland in Mr. Abplanalp's teaching or work, but some things are never forgotten. The new boys in Kamehameha are always a little startled when they hear grace being said not in Hawaiian or English but in the German of Switzerland. But the older boys know that this friend of theirs brought something from the mountains of Switzerland which is at home with the mountains of Hawaii.

The Story Of GOAT FEATHERS

No human being ever tells the whole truth about himself. We seem to be born liars in that particular — all of us — and we are no different.

We're starting out now to tell the bitter, agonizing truth about ourself, but before we're thru we shall probably be lying at the rate of a mile a minute, and cracking ourself up something awful! A man can tell only so much truth; then he begins to wobble.

The truth is, we ought to be making as much money as John D. Rockefeller, and winning prizes of honor, and we're not. We ought to be better known as a humorist than George Ade and Mark Twain rolled into one, and we're not.

The trouble with us is that we are too ready and eager to break away and go gathering goat-feathers. If it had not been for that, we might be a millionaire, or the President of the United States, or the leading American author, bound in Red Russian leather — and when people passed our house the natives would say, "No, that isn't the city hall or the court house; that's where B. J. lives." Of course, some strangers would say, "B. J., the mechanic?" but that would be the ignorant few. The real people would whisper, "B. J., the lecturer!" in a sort of subdued awe, and remove their hats. Some of them would pick a blade of grass from our lawn and take it home to hand down to their children's children as the most treasured family possession.

As it is, we have gathered so many goat-feathers that half the people introduce us as B. J., and the other half as J. B.; and if there is a ton of hay growing on our lawn, nobody bothers to pick a pint. Our man has to cut it and rake it away.

Goat feathers, you understand, are the feathers a man picks and sticks all over his hide to make himself look like the village goat. It often takes six days, three hours, eighteen minutes to gather one goat-feather; and when a man has it and takes it home, it is about as useful and valuable to him as a stone-bruise on the back of his neck.

Goat-feathers are the distractions, side lines, and deflections that take a man's attention from his own business and keep him from getting ahead.

We think we can claim, without fear of dispute, to have gathered more goat-feathers in a fifty-five year career than any other man living. We estimate that in the last twenty years we have gathered

twenty thousand pounds of goat-feathers at a cost of about five dollars a pound, and the whole lot is worth about twenty cents.

What we marvel at is that we make a living at all. Our telephone rings seven thousand eight hundred and six times a day, and seldom is it rung by anyone who wants to buy our time or ability. The other eighty-two million times it is rung by people who want us to gather a new crop of goat-feathers.

At one time, we moved out to the garage to get away from the telephone. The result was that we had to come down out of the second story, walk across our driveway, enter the house, and go inside every time the telephone rang. We did this eighty-two times a day, and then moved back to the house and had an extension telephone put in our workroom so close to our desk that every time we flexed a muscle we knocked the phone off its table. This made it more handy for the goat-feather distributors, so they called us up oftener. They call us before we are out of bed, when we are in the bathtub, and after we go to bed. Usually, they call us to the phone and tell us to wait a minute until Mr. Jonesky comes. The favorite times for calling us are when we are in the bathtub, when we are at meals, and when we are trying to concentrate on our work.

We are not blaming anyone for this. We did not have to rent a telephone. We could have let people come to the house. A great many do come to the house. On the average, it takes the person who comes to the house just one hour to state a proposition that could be put in a six-word telegram, or phoned in one minute. About a half-hour later, the visitor remarks, "I know you are very busy, and I hate to ask you, but —". Then he asks us to do some little trifle, like raising \$80,000,000 in Davenport for the War Fund of the One-legged Gardeners' League, which has a plan for planting sweet peas in the trenches in Mesopotamia. "We know you can do it," he says pleasantly. We know we can do it, too. We feel the great urge of ability rise within us. We don't care a hang for Mesopotamia, or for sweet peas in the trenches there; but it is something we can do and we are asked to go ahead and do it. We gather two quarts of red, white, and blue goat-feathers, give eighteen magazine editors a chance to forget we are alive, and find at the end of the month that we are deeper in debt than we were before.

If there were a Pulitzer prize for the greatest human goat, nobody else would be in the running. We have not gotten goat-feathers by the dozen or by the pound — we have them by the bale. We estimate that if all our goat-feathers were placed end-to-end, they would reach from the bread line to the poorhouse.

It is just possible that by this time you may have gathered that we have a grouch on ourself. You are right. Presently the infirmities of age will begin to gnaw at us, the moths will ruin our flossy collection of goat-feathers; all of those who now pat us on the back because they can make use of us free-of-charge will forget that we are alive, and our executors will shake their heads and say, "Ain't it too bad he left so little."

Distraction isn't really good for a man if he wants to reach a goal. No salesman ever got very far by carrying too many side lines. The poorest sort of monopoly for any man to undertake is a monopoly of goat-feathers.

Even a cow does better if she sticks close to the business of eating grass and chewing the cud. When she starts in to learn to whistle like a catbird, and to flit from field to field like a butterfly, it is safe to say she is no longer a success in life. When a cow strays from plain milk-producing methods and begins climbing trees and turning somersaults, she may be more picturesque, but she is gathering nothing but goat-feathers. Seven farmers, a school teacher, and a tin peddler may line up along the fence and applaud her all afternoon until she is swelled with pride, but when she gets back to the barn at sundown she will not give much milk. She will not be known as a milch cow long; she will be a low grade of corned beef, a couple of flank steaks, and a few pairs of three-dollar shoes.

We can sit down to write a story about a man who fell off a bridge and landed in a kettle of tar on a canal boat, and, before we have completed a full paragraph, we can have stopped to clean the small "o", small "e", and small "a" on our typewriter, stopped to think about the pearl buttons on a vest we owned in 1894, the Spanish-American War, what is the French word for "illumination", and whether we paid our last Liberty Loan installment. Before we have finished that first paragraph, we may have stopped to fill our fountain pen, and taken a trip to Chicago. Before we have gotten to the first period in the first sentence, we may have decided that we would not have a man fall off the bridge, but have a woman fall off it; that we would not have her fall off a bridge, but off the Woolworth Building; that we would not have her fall into a kettle of tar, but into a wagonload of feather beds; that we would not have her fall at all; that we would not write at all; and that we would, instead, get an empty cigar box and make another Wishing Buddha.

So far as we are concerned, the most important person in the world is ourself. The most important success in the world is our

success. The most important money in the world is our money. The whole lot of the most important debts in the world are our debts. The same is true of you and your success and your money and your debts.

We hope you are not near fifty years old. We hope you are nearer twenty; but whatever your age, we can tell you that chasing after goat-feathers is mighty poor business. The time to investigate interesting by-paths is when you are on a vacation, but the New York-Chicago Express gets there by staying on the track. The minute it starts climbing some interesting country lane after daisies and buttercups, the coroners begin to gather and the claim agents flock together, and some slow but sure old freight train, plugging along on the next track but sticking to it, toots a couple of times and passes by.

If we are ever the boss of a school board we shall insist that no child graduate until he can foot correctly a pile of numbers four deep and forty high, and do it the first time. We have been a bookkeeper in our day, and have footed a column of figures twenty times and gotten ten different results. We can go up a column of figures, starting like a race horse — "Seven and six are thirteen, and five are eighteen, and two are twenty, and — and we wonder if we put a stamp on the letter we mailed this morning — we wonder if Bacon wrote Shakespeare's plays — we wonder if a bomb from an airplane would go thru from the roof of our house to the cellar — cellar — cellar — well, we're glad we have our coal in, but we'll have to get more in as soon as we can — and six —." Then we have to begin at the beginning again, with "Seven and six are thirteen."

The reason children don't get their examples right in school is because they don't concentrate on the matter in hand; and the reason men don't get their lives right is because they don't concentrate on the matter of making good at what they know is the business of their lives — success. If you stop a moment and think of the men you know who are not successes, but who might be successes, you will find they are goat-feather gatherers. Anything that leads a man aside from the straight path to his goal is a goat-feather. Every useless side line is a goat-feather. Every unnecessary distraction is a goat-feather. Nine-tenths of the things we do are goat-feathers.

So there you have the story of what is the matter with us. You know now why, when you think of us, you think of something we did do. We had our goals, but we also liked too well to investigate all the cross-roads instead of keeping straight on. That's bad; that's gathering goat-feathers. It has been bad for us, and bad for our success in the only life we have to live; but it is apt to be

much worse for you to gather goat-feathers than for us to gather them, because we can, occasionally, weave some of them into a talk or article, while you can't do anything at all with those you acquire.

The time we waste in excursions off the main line of our road to our goal is the difference between success and half-success; often it is the difference between success and failure.

The Story Of "THE SPECIFIC"

"Big idea" behind golf is to see in how FEW strokes 18 holes can be played. A "76", tho lower, is higher than a "104." It proves skill, art, and ability to accomplish objective of golf.

It has been said, "One who plays 18 holes in less than 100 is neglecting business. One who plays 18 holes in more than 100 is neglecting golf."

To be a master of any game, one must give it time, study, concentration, and become its intimate. The great accomplishment in golf is to play a "hole in one". When a man will tee his ball, take his club, assume his stance, think upon his objective, keep his eye on the ball, deliver his drive, and then feel the thrill that comes from seeing the ball sing thru the air, roll on the green, and finally land in the hole in ONE — that's skill. Same is true of any sport. Baseball player discredits and drives himself back to "the sticks" if he finds it "necessary" to fan his ball; take four balls and walk his base; take three strikes. Men worth while, like Bobby Jones or Babe Ruth are those who make ONE strike HIT ball right, send it sailing over the fence, make all bases in ONE delivery. They are paid big money for knowing where and how to "hit the pill" ONCE, with scientific delivery that accomplishes the ultimate objective of baseball. And behind that art are years of THAT kind of study and preparation.

Story of Chiropractic is *simple*. Its birth was *simple*, principle is *simple*, practice is *simple*; results are *simple* to understand and to attain.

In spring of 1895, two people were standing before an open window in a four-story building on Second and Brady Streets, Davenport, Iowa. One was a man of fifty; other, a boy fourteen. Outside, elements were doing their worst. It was one of those stormy days of Mississippi Valley in springtime. Wind was blowing, lightning flashing, rain pouring in sheets. These people were looking out of window, admiring this storm.

Father had his arm around boy's shoulders. Father was saying to son, "Up there in the sky is a great untapped reservoir of intellectuality. If man could tap that reservoir, bring those intellectual forces down, make them work in man, man could accomplish anything man wants to accomplish."

In fall of 1895, this father said to his colored janitor — Harvey Lillard: "Harvey, how long have you been deaf?" Harvey answered,

"Seventeen years." "What was the occasion, how did it happen, what brought it on, Harvey?" And Harvey answered, "I was down in a stooped, cramped position and I heard something 'pop' in my neck. I became deaf immediately and have been deaf ever since." This father then said, "Take off your clothes, Harvey, and let me look at your neck. Let me see if I can see anything wrong."

This man looked and, by one of those miracles, there was one of those unusual bumps; one that today would be found in one out of a thousand people. Father pressed upon it and said, "Does it hurt?" Harvey replied, "Yes, that is sore." "Lie down on the floor, Harvey." This man pushed that bump once each day for three days, and Harvey's hearing *was* restored.

The man who made that discovery was our father, D. D. Palmer. Then began a new process of reasoning, which you know as the art, science, and philosophy of Chiropractic.

First: IF PRODUCTION of one bump PRODUCED deafness, then REDUCTION of that bump should RESTORE hearing.

Second: IF PRODUCTION of one bump, IN ONE MAN, produced deafness; and REDUCTION of that bump IN THAT MAN restored hearing; then reduction of other bumps IN OTHER MEN should restore hearing IN OTHER MEN.

First came accidental birth of an idea, accidental discovery of bump, accidental reduction of bump, and net result desired — hearing. The art, therefore, began by accident. Gradually, original idea grew.

Third: IF production of one bump produced deafness, OTHER BUMPS IN OTHER PLACES should produce OTHER diseases.

Fourth: IF production of one bump produced deafness, and reduction of that bump restored hearing, and production OF OTHER BUMPS produced other diseases, then reduction of OTHER BUMPS ought to restore health to other places.

The art grew. It was tried; it worked; it proved idea was sound, even if nobody then knew how or why.

About this time, this man grew tired — he lay down and went into that last long sleep, and responsibility of development of that idea fell upon the boy who was then about eighteen years old.

This boy seemed prophetically to understand there was something greater in that idea than was on the surface. As an incident in the boy's vision: early in youth, this boy saved his father's longhand communications. Father threw them in the waste basket. Boy would pick them out and save them. From that day to this,

there has been constantly growing a scrap book of anything and everything, directly or indirectly concerning this movement. It runs into hundreds of thousands of communications, card indexed, catalogued, and instantly available.

Backbone of vertebrata, previous to 1895, was practically unexplored territory. It was, in a sense, an undiscovered continent. (While we are on the subject, let us state the principles and practices do not confine themselves to man. These are broad and practical enough to apply to *any* animal that has a backbone. Animals have been adjusted for years with success. While some might disparage publication of that fact, nevertheless, being a true principle, it is to its credit that it can be so applied.) We compare this backbone to that of the continent of Africa. What a situation existed when Livingstone embarked from his ship, got into a skiff, and went into the interior of darkest Africa. We wonder what went thru the mind of Livingstone when he faced that continent, little knowing what savages were; wondering what animal life was; and he was expected to penetrate into it and return with a report. As you will recall, he got lost and they sent Stanley after him.

This backbone territory was also an undiscovered continent. No man had ever entered this continent of the living human backbone. No man had penetrated into its physiological secrets. There were many things neurologically unknown that existed there. It is not necessary to go into the West to discover the great American desert, it is found under the hat of the average American. There is little that man knows about man. We know little about ourselves. There is so much to learn, and so little time, and so few helpers. There is so much to be accomplished, for life is short to accomplish this great job ahead.

Anatomists said something about bones acting as a frame; physiologists said something about muscles working like frogs' muscles; neurologists knew something about origin and insertion of nerves there; but no book told us what place in the great scheme of man did man's backbone play; nobody told whether it was important or just something generally expected to exist. No printed work told whether it was the most or least important part; whether it was the head or tail of existence.

At one time, in St. Paul, there was held a joint Senate and House Health Committee Hearing on a Chiropractic bill. Faculty of Medical Department of University of Minnesota was present. We questioned existence of SYMPATHETIC nervous system. One physician said, "Do you mean to say what we know about anatomy is not so?" We replied, "No, doctor, all you know about anatomy is so, but you do not know all that is so about anatomy."

Gradually, Chiropractic grew. It is now premised upon certain principles.

Fifth: Fixed physics fact that matter cannot move without force or energy.

Sixth: Human matter is in motion as human energy gets to human matter.

Seventh: Human matter moves in exact ratio as human energy is delivered to human matter.

Eighth: More mind in more matter equals more motion.

Ninth: QUANTITY flow of mental energy, between brain and body, predetermines QUALITY of function at periphery.

Human brain is a human dynamo. Human muscles are a series of human motors. Human nervous system is a series of transmitters of human energy, conveying human electricity between brain and body. Human mind is great intellectual controller of human energy. Mind is thot-force. Given a properly working human dynamo, given a proper receiving set of muscles, man will be normal in action. If brain GENERATES thot-force, if nerves CONVEY thot-energy, if body RECEIVES mental function, that body will act normally and be healthy in all parts.

If normal QUANTITY of mental impulses gets thru from epiphery to all parts of body, we will have normal QUALITY of function at periphery. QUALITY at periphery is dependent upon QUANTITY from epiphery.

Consider electric globe. If there is no QUANTITY of electricity getting thru, there will be no QUALITY of light. If there is a full QUANTITY, there will be a full QUALITY of light. QUALITY of light is dependent upon QUANTITY of electricity that gets thru. Light is presence of normal QUANTITY of electricity. Darkness is absence of normal QUANTITY of electricity. Darkness and light, depend upon PRESENT or ABSENT QUANTITY of current. This is so obvious no sane, sensible man could or would dispute.

Suppose darkness is present. Who would wrap a red flannel rag around globe; soak it in goose grease or lard; inject vaccine virus; give nux vomica; bathe in hot or cold water; shake with a vibrator; get its radionic vibrations; or cut off its feed under a dietitian's schedule?

Man is not always healthy. He has dis-ease. This is because of interference to QUANTITY flow of human energy between brain and body. This interference to QUANTITY flow of thot-force

between brain and body reduces QUANTITY of energy which flows to tissue which should be moved upon by it. This reduces peristaltic activity of tissue cellular matter; reduces degree of action, as a direct result of which ease or normal activity has been converted into a dis-ease or abnormal reduced QUANTITY of activity, which consequently unbalances chemical QUALITIES of that body, in part or totality. Interference reduces QUANTITY flow from brain, affecting QUALITY of function at periphery.

Death is darkness. Death is because of a NO-QUANTITY-FLOW between brain and body. Life is light. Life is because of a FULL-QUANTITY-FLOW. Dis-ease is because of a reduction between NORMAL QUANTITY and DEATH QUANTITY of flow between brain and body. That which produces interference is that physical matter which possesses physical properties which can interfere with flow of abstract thot-force between brain and body. That which produces interference is a vertebra which can be so misaligned in position between ones above and below that it occludes an opening thru which nerves pass. This occlusion produces pressure upon nerves, which nerves convey thot-force flow between brain and body. This interfering medium is a MECHANICAL distortion of normal position of a vertebra in spinal column. This MECHANICAL interference creates a human electrical flow disturbance of normal QUANTITY which creates a CHEMICALLY unbalanced QUALITY at periphery.

Brain is EPIIPHERY. Tissue cell is PERIPHERY. Nerve connects epipheral brain to peripheral body. Somewhere along path of this nerve is this subluxation.

DARKNESS in globe is equivalent to DEATH in body. LIGHT in globe is equivalent to LIFE in body. Flickering or failing light is equivalent to diminishing or failing life in human body.

Suppose "disease" is present. Who amongst us would soak it in goose-grease or lard; wrap red flannel rag around it; inject vaccine virus; give nux vomica; bathe it in hot or cold water; shake with a vibrator; get radionic vibrations; look at urine in test tubes; count corpuscles of blood; study feces? Why any or all of this? Obviously, to desire to return life where life is failing. And why does it fail? Because of its QUANTITY being gradually reduced from HEALTH OR LIFE QUANTITY to DISEASE OR DEATH QUANTITY. Does any of these restore a greater QUANTITY of thot-force from brain to body? If it does, how? If none of them do, why do them? If they cannot, then something is radically wrong in older order of thinking and acting between doctor and patient.

What is the fundamental objective contained within principle

of Chiropractic? What is the purpose of everything a Chiropractor does? To find correct position of interfering medium, exact location of interference, and to restore normal quantity flow between brain and body is duty of the human electrician, commonly called a Chiropractor.

We have frequently said that the Chiropractor is a human telephone trouble shooter. He is a backbone button specialist. He knows where to turn on the button that turns on current. When that is done, he has done all HE can do. Rebuilding to health is up to the internal HUMAN electricity in the patient. When once he finds interfering spinal location and its abnormal position; when once he adjusts position of that interfering medium, restoring its position to normal and removing that interference, there will be a restoration of that flow of human thot-energy to various parts of body, and they will then receive NORMAL QUANTITY of life flow and will re-establish normal peristaltic activity in tissue cells, which restores normal QUANTITY of muscular and functional duties, which, given time, will rebuild health into those tissues, organs, or viscera. When once MECHANICAL has been brot to normal, CHEMICAL automatically follows. In ratio as life returns, disease becomes absent. In exact ratio as light returns, darkness disappears.

Predetermining factor is that quantity produces quality. Principle is simple, practice is simple, result is simple. That is all there is to our Chiropractic story. That was the discovery that was given birth by father at time when Harvey Lillard lay on floor and first push in back was made.

Many people say, "Why do you do everything different from physician? We would think you would need know all he knows, think as he thinks, do as he does." That is a question of approach! We are both interested in sick getting well. We do not question motives or personalities of physician. We question correctness of his principle and practice. Medical men are as sincere and honest as Chiropractors; desire to get sick people well as much as we. There is little difference in mentality, but they approach sick man on principle:

First: Man, as a matter of study, is physics and chemistry.

Second: Man would be normal if his physics and chemistry were balanced.

Third: Man, as a matter of sickness, is a problem in physics and chemistry.

Fourth: If physical and chemical properties are improperly balanced, man is sick.

Fifth: CAUSE of sickness in man is an unbalanced physics and chemistry.

Sixth: Man would be well if his physics and chemistry were balanced; therefore,

Seventh: It is the duty of physician to see they are properly balanced.

Eighth: To get man well, he should be given certain physical and chemical properties to balance his minus physical and chemical conditions.

Ninth: Therefore, he adds to or takes away from present or absent physical or chemical, certain physical or chemical ingredients which, in his opinion, as a matter of medical education and practice, he thinks necessary to establish physical or chemical balance.

Chiropractor has seen fit to lay down A NEW LAW of existence.

To the Chiropractor, man is a spiritual, electrical, mechanical, chemical being—spiritual as to his intellectuality; electrical as to internal thot-energy flowing thru nerves; mechanical in its every active functional movement; chemical as to the by-product of the mechanical. Chemical is a by-product of the mechanical; mechanical is a by-product of electrical; electrical is a by-product of spiritual; spiritual, being source within itself, is a by-product of none other than itself. We approach man, then, according to that basis. We approach man first as to his being a spiritual being; second, as to his being an electrical being; third, as a mechanical being; fourth, as a chemical by-product of other three—in that order of study and evaluation.

Medical man BEGINS where we leave off, viz., with chemical, and that is where we arrive last. We leave off where he begins, viz., his FIRST thot is chemistry of body, and that is LEAST AND LAST of our thots. Medical man begins at affect—disease. We begin at cause—Innate Intelligence. Medical man begins his problem with chemical study—disease. We begin our problem with spiritual—Innate Intelligence. Medical man sees, studies, and tries to doctor abnormal product—disease. We see, study, and find no necessity for doctoring normal producer—Innate Intelligence. Medical doctor begins with pathological end—disease. We begin at spiritual beginning and see no necessity for trying to doctor the disease, for it automatically takes care of itself if the beginning (Innate Intelligence) can reach the other end.

Spiritual and electrical are ALWAYS present in PROPER quantities. We have nothing to do with that within ourself or another;

neither have you. We cannot change it; neither can you; neither can any other man. Electrical CAN BE interfered with, not in normal quantity as to source, but in quantity flow AFTER IT HAS LEFT SOURCE. If it is interfered with, then mechanical will be slowed down, chemical will be abnormally unbalanced. If QUANTITY OF ELECTRICITY is flowing normally between brain and body, MECHANICAL action will be normal; and if mechanical action is normal, CHEMICAL QUALITY must be. It needs no outside, artificial arbitrary or empirical bolstering up or reducing down.

Physician begins with product — disease — in his observation and treatment. Chiropractor begins with producer — Innate Intelligence — in his analysis and adjustment. One begins with what power HAS DONE; other with power that DOES IT. We begin at opposites to attain same objective. Physician says physical and chemical are all. There is no more. Chiropractic who believes in spiritual, electrical, mechanical, and chemical admits physical and chemical but SUPERIMPOSES AND SUPERCEDES physical and chemical with spiritual, electrical, and mechanical.

Chiropractor does not deny presence or diagnosis of "indigestion" based on hyper-acidity, which is chemical unbalance. He tactitly admits this. He affirms "indigestion" is based on "hyperacidity"; "hyperacidity" is based on "excess of acids"; but he now ADDS that "excess of acids" is because of a minus mechanical action; minus mechanical action is because of a minus electrical flow interfered with; interfered-with electrical flow is because of vertebral subluxation producing pressure upon nerves between brain and body, thus abnormally transforming normal quantity flow which eventually does produce abnormal quality of chemistry in stomach.

Physician looks at, studies, and names QUALITY of symptoms and pathology; quality of death present. He diagnoses DEATH he observes; prescribes for this DEATH present, hoping he can revert or convert DEATH to life by external aid. Chiropractor looks at, studies, and measures QUANTITY of Innate Intelligence mental impulse flow OF LIFE which is or is not present. He analyzes LIFE he observes; he adjusts so that MORE LIFE can flow to external where it is needed. One studies STATIC DEATH; other, DYNAMIC LIFE. One diagnoses disease; other analyzes cause.

What knowledge of LIFE could we get by studying DEATH? Physician looks at and studies quality of flickering darkness as it steals into electric globe; diagnoses it as hypodarkalgia, and then injects, rubs on, or prescribes something on or into the globe which he thinks will chemically restore electric light. Chiropractor looks

at and studies QUANTITY of electricity NOT flowing INTO globe; analyzes what is interfering with that normal flow; gives an adjustment to mechanically disarranged parts and RESTORES ELECTRICITY THUS RESTORING LIGHT. If Chiropractor accomplishes what he desires, HIS way, why should he waste time playing with other fellow's way, because physicians and people think we ought to think as physician thinks, whether or not it is of value?

In approaching problem of sickness, we can do two things: treat effects, everything by way of stomach; or adjust causes, everything by way of back. Physician takes former approach. We take latter. Physician dopes quality chemistry of stomach with chemistry. We adjust quantity electrical flow at its interfering location by adjusting vertebral subluxation.

We hardly blame physician when he calls Chiropractor ignorant. We ARE ignorant of everything HE thinks essential. We call HIM ignorant. HE is ignorant of everything we think necessary. *He* thinks *we* must learn everything *he* learns, to be able to do nothing he does. He is right! *We* think *he* should learn everything *we* learn to do anything we do. We are right! He thinks we must study diseased end he studies to change that diseased end to condition he thinks diseased end must reach. And if we desired to change diseased end to condition he thinks that end must reach, then we would have to study his subjects and do what he does to do it. We think he should study our spinal column to change subluxation, to relieve pressure, to restore quantity flow of human electrical flows. And if he desired to change that subluxation to correct conditions subluxation must be adjusted to, *he* would need study *our* subjects and do what *we* do to do it. We admit we are ignorant of things he thinks we must know. He admits he is ignorant of things we think he should know. Because our problem and its solution is opposite, each thinks in terms of opposite, acts in terms of opposite, and accomplishes objectives in terms of opposite. That is why he is a physician and surgeon and why we are a Chiropractor. He believes in the principle and practice OF MEDICINE and we believe in the principle and practice OF CHIROPRACTIC — neither of which is like unto the other; neither could one substitute educational subjects or practices for other. Chiropractors have competently equipped schools wherein principles, practices, and subjects essential thereto are adequately taught with ample clinical facilities, graduating them in the subject, issuing diplomas, after which they take examinations and secure licenses in all but three of the states of the United States, and in many foreign countries.

It would be foolish to think we should study PRINCIPLE of

medicine and PRACTICE adjustment of vertebral subluxation. It would be equally foolish to think he could study PRINCIPLE of Chiropractic and PRACTICE prescribing drugs. PRINCIPLE AND PRACTICE must correspond. He who follows either must be consistent in thot and action. We could not study medicine and be a Chiropractor, any more than he could study Chiropractic and be a physician.

(Addenda A, in rear, is an interesting sidelight which goes to motives of why men can be wrong and fight for existence of a decidedly convincing wrong, and yet perpetuate it, knowing it is unsound and injurious to human race. It is appended for reasons stated. Read it now, or as a conclusion later.)

Thousands of patients go to physicians and fail to get well. PRINCIPLES and PRACTICES of medicine have failed to restore QUANTITY flow of human electrical currents. Those same patients go to Chiropractors and get well. PRINCIPLE and PRACTICE of Chiropractic have succeeded in restoring QUANTITY flow to periphery. These same physicians have afterwards examined these patients, admitted they were well, and denied it could be done, working under the principle and practice of the very principle and practice that accomplished the objective. They affirm our product and deny the producer.

When physicians prescribe drugs, it is believed by them that each chemical drug has a direct affinity effect upon certain organs, by way of stomach, and no indirect untoward effect upon others. Drugs go into mouth, thru throat, into stomach. Stomach, in some unaccountable way, knows where to send drug; stomach knows intent physician had when he gave it in teaspoon in mouth. How does stomach of patient know that mind of doctor intended certain ingredient to go to liver, or right big toe — and sends it there? Mind of Chiropractor makes no such presumption regarding spiritual, electrical, mechanical, chemical activities in patient. He adjusts vertebral subluxation interference; brain generates normal quantity; nerves convey normal quantity of thot force to place where those nerves go. Chiropractor has nothing to do with location of those nerves — where they come from or where they go. He has nothing to do with quantity of thot force. All he does is adjust interference — that is ALL he CAN do. Beyond that, it is up to quantity of intellectuality to generate normal quantity of human electrical flow; to produce normal quantity of mechanical activity; to produce normal quantity of chemicals needed to perform certain human functional necessities at place or places needed. We presume no understanding that every physician presumes when he gives a drug. When this NORMAL QUANTITY electrical flow arrives at periphery, it executes normal QUALITY of life. This Innate life power within is intellectually controlled within patient

— something we, as Chiropractors on outside, have nothing to do with. We make no claims to have anything to do with it.

When you turn on button, you do not CONTROL ELECTRICITY; tell HOW MUCH electricity to go to globe; tell it WHEN to go. When you turn on button, IT GOES! When it arrives, it gives light.

When you give an adjustment, human electricity knows where to go. How much to go is predetermined by spiritual Innate Intelligence. When you give an adjustment, WHERE mental impulse that force is to go is governed internally in the patient. When you give an adjustment, IT GOES! It arrives after you give adjustment, and LIFE is the ultimate. That is something you have nothing to do with. Chiropractor does not stimulate; does not inhibit; does not massage or violet-ray the button; does not diagnose the wires, globe or juice. And while we are on this question of contradictory principles, to one who reasons, it is easy to differentiate between medical and Chiropractic principles; medical and Chiropractic practices. Fields of theory and duty are clearly defined. Each has a field of its own, and each school should remain within that field. Yet there are "chiropractors" who know so little of the Chiropractic principle and practice that they try to straddle this problem by riding one foot in the stirrup on horse, other foot on throttle of automobile—horse headed east, automobile headed west. They try to play fast and loose between diagnosis on front and adjustment on back, thinking they can catch unwary sick coming and going. Net result of that pursuit is they do not completely think one thing or the other; they dilute every thot with contradictory theories; they desire a service, and only partially arrive on either objective. He who is neither hot nor cold is lukewarm.

Some of this dilly-dally attitude upon part of some "chiropractors" is based upon idea they think patients who come to their offices want more of same failure medical treatments they received in physicians' offices. They proceed to act like physician; look like one; ask questions like one; do things one would do; hem and haw like one; and try to use instruments physician uses. Average Chiropractor knows average physician has scientifically convinced mass of sick people that a mass of failure is popular profession to follow. Average sick person would rather die diagnosed at a fancy price than get well undiagnosed at hands of a Chiropractor for a consistent fee. Some Chiropractors would rather be popular than get sick people well. So they follow line of least resistance, goosestep, attempt to be what they are not qualified to be, and forget to deliver what they were trained to deliver and hold themselves out to be.

If sick public, entering Chiropractor's office, anticipate getting what they got in physician's office, they must be disillusioned. If they expect to have thirty minutes' time spent upon their ills, they should be awakened. Competent Chiropractor will spend ten minutes telling patient why he will not waste other twenty minutes doing unnecessary and foolish things which accomplish no return for investment of time or money, either in health to patient or knowledge to Chiropractor. Spend ten minutes and do what a Chiropractor knows he must do. Why waste twenty minutes of mysterious hokum? Why must Chiropractors think they, too, must go on fooling sick people because they have always been fooled and expect more fooling in Chiropractor's office?

Some time ago, a physician of well-known reputation came to our office with his wife. He is a well-known surgeon — runs a big hospital. We won't mention names. He brought his wife for professional service. First thing we said to doctor was, "Bringing YOUR wife to ME for professional service? Let's have a clear understanding. There is nothing YOU know that has been of any value to your wife. If anything YOU know WERE of any value, you would have used it on her and she would be well and would not be here. Do not waste your time telling me what YOU KNOW. Your position demanded greatest specialists, physicians, and surgeons in the world. You have had your wife before all. If anything any of them could do was of value, it would have been done, she would be well, and you and your wife would not be here. Do not waste time telling me what failures you have experienced — we have no time to waste on failures. YOU brought YOUR wife TO US for OUR service; then you are going to get OUR service and not YOUR service thru us. We are not going to repeat anything you or your profession have thot or used, because all that has failed."

We said to ourself, "This is a case of steel meeting steel. One of the world's greatest surgeons is now in contact with the world's greatest Chiropractor. This is a test case of where it is our method against his, our system against his, Chiropractic principle against medical, and Chiropractic practice against medical. It is he against us, and we against him — not personally but professionally." There was no use of our trying to fool him, by repeating to him what he knew, so we said, "Doctor, it is OUR principle and practice that is going to accomplish our objective, therefore let US alone while you are here." We, afraid of a physician; afraid of a man who knows a million things that are not so and will not work? Fact that he brought HIS wife TO US, showed he was a professional zero with professional rim knocked off, and we say that with no disrespect to him personally.

One day his wife awoke and said, "I have certain symptoms." He said, "That is your sympathetic nervous system." She said, "No, it is my atlas," for that was location of interference.

As a Chiropractor, we knew she had certain subluxation in her spine which was producing pressure, which was interfering with normal QUANTITY flow between brain and body. It was our Chiropractic duty to definitely locate that place and adjust it, releasing pressure upon nerves, making it possible for restoration of NORMAL QUANTITY of mental impulses to flow into her body, after which she would get well of whatever she had, no matter how many diagnosticians had differed in their opinions of what they thot she had. In getting her well, we did not go to periphery of nerves and look at effects, with a microscope; test them with tubes; count corpuscles; study blood pressure or count heart beats. Neither did we soak effects with goose grease on a red flannel rag; inject vaccines or serums; prescribe any one of endless multitude of complex prescriptions of drugs; soak her external tissues in hot or cold water; shake them with vibrator; count radionic vibrations; or look at any excresence from her body.

Patient stayed several months. We went on with our Chiropractic principle and practice, locating vertebral subluxation and adjusting it. At no time did we look wise and ask foolish questions about quality of death of her symptoms and pathology. Physicians had done that — that was why she was here! At no time did we look at her tongue, take her temperature or blood pressure, or attempt to diagnose her case. World's best specialists had done that — that was why she was here!

Physician knew that he knew what he knew; and he knew that what he knew had failed. So he brot his wife to a man who he thot knew SOMETHING DIFFERENT; could and would do SOMETHING DIFFERENT, and accomplish a DIFFERENT result. We were the simple Chiropractor, thinking simple Chiropractic philosophy, being a simple Chiropractic adjuster.

This case went home WELL — and to this hour we still do not know WHAT her ailments were, WHERE they were, or HOW. It was not necessary for us to know that to locate interference and adjust it, and restore transmission between her brain and body, thus doing thing no physician had thot or done.

(It is to be hoped that every patient of a Chiropractor who reads this will encourage his Chiropractor to do only those things which will hasten his getting well. Urge your Chiropractor to be only a Chiropractor; to confine his dealing with you to doing those things which will hasten your recovery. There is no curative value in treatment of any kind. Massage of back feels good, but it in no way releases pressure upon nerves or restores transmission of normal quantity of mental impulses. It temporarily stimulates,

but it possesses no cure. That which will cure must come from within you. It can come only from within, after subluxation is adjusted. Go to a Chiropractor, insist upon a vertebral adjustment, and THEN STOP. If he desires to give you more, it is because he thinks you want to be rubbed, treated, and to otherwise waste time. Let him know it is your desire to get well in quickest space of time, which reduces your doctor bill with him. If he knows you have no desire to be humbugged, he will confine himself to Chiropractic principle and practice. He uses other treatments only because he thinks YOU want them. Physician after physician has given you treatments with no result — that is why you came to Chiropractor. Confine your requests and Chiropractor's actions TO CHIROPRACTIC.)

Chiropractic was born of two theories: first, that a vertebra in spinal column *could be* subluxated and *could be* adjusted by hand; second, that this subluxation *could* interfere with an abstract mental impulse flow of energy and, when vertebra was adjusted, *it restored* this flow of energy between brain and body. Neither of these theories upon which Chiropractic is premised had been advanced previous to 1895. They were NEW theories. They never had been proven or disproven. They were theories seeking expression.

Then came Spinograph — X-ray. It was introduced into our ranks to prove that segments of backbone COULD BE AND WERE out of alignment BEFORE adjustment, and COULD BE AND WERE realigned AFTER adjustment. This took vertebral subluxation and its existence out of field of theory and put it into field of science, as a prima facie fact.

Then there was introduced a specially built thermo-couple heat detector, used to locate and to prove location where there was pressure upon nerves; that there was interference to transmission, which resistance set up increased heat at that point; and that this existed before adjustment. It was used to prove this imprisoned body force was restored after adjustment, releasing interference to transmission, restoring that point to normal temperature. This took the abstract-flow-of-mental-impulse-supply-from-brain-to-body OUT OF FIELD OF THEORY and put it INTO FIELD OF SCIENCE, as a prima facie fact. Each of these principles has been proven to be scientific. (For further enlightenment on this subject, read REASONS FOR MY FAITH.)

Physicians then said and a few still say a vertebra cannot be moved by hand. Short time ago, professor of pathology of Leland-Stanford University (California) made an experiment. He found it took 2,800 pounds DEAD WEIGHT to move one vertebra upon other in a cadaver. "For this reason," he said, "no man can exert a force of 2,800 pounds with his hands and move a vertebra in a living human body." We answered the professor by saying his position was sound. We, too, had made same test and found his

figures approximately correct. That conclusion is sound. There is no man who has ability to exert 2,800 pounds "dead weight" on one vertebra and move it in relation to another, in a cadaver. We give you an experiment to prove his contention: Take a soft piece of pine, a hammer, and a spike. Place spike-point against soft pine. Pile DEAD WEIGHT on top of nail head and see what becomes necessary before spike can be pushed into soft pine board. It took 2,345 pounds. By contrast, take same two-by-four, same spike, ordinary hammer weighing ONE pound. Raise hammer in air with one hand, alone; come down WITH SPEED on that nail head, and any girl can drive that spike into that board with absolute ease. That is what Chiropractor does to vertebra in A LIVING BEING "which cannot be moved by hand of man." He takes his arms which weigh perhaps twenty pounds, and, BY SPEED OF MOTION, can move a vertebra. One was a test of what DEAD WEIGHT would do in a laboratory. Other was a test of what LIVE WEIGHT could do in a clinic. With this question, like many arising in minds of physicians, impossible becomes possible by a DIFFERENT principle and practice. He was honest in offering laboratorial proof it would take 2,800 pounds to move one vertebra upon other; he was wrong in conclusion that it could not be moved by a LIVING man when he puts LIVING muscle into LIVING action — for one pound of muscle becomes, geometrically, thousands of pounds when put into active speed motion. Principle we use as Chiropractors to move subluxated vertebrae is same recoil principle used in projective guns; trip hammers; by boxers, in short, quick jab to jaw; in pile drivers, where little weight does much work when put into quick motion.

We once made the statement, before a group of physicians, that we could adjust vertebral subluxations. One said, "Do you mean to say you can use your hands, here and now, and move a vertebra in the backbone of a living man? You can't do it!" We said, "Doctor, here is a conflict of opinion. You say we cannot, we say we can. We are ready to do it. Are you ready to give us your back and let us try it? If we can't, then you have nothing to lose." He replied, "By God, no. You might do it!"

Dr. Crile, in his eminent work, A BIPOLAR THEORY OF LIVING PROCESSES, asserts the principle herein laid down. This "theory" advanced in 1895 is now absorbed into human economy as one of the great principles. Read scientific magazines — what they are NOW saying about this great internal power in man. They contend it is the greatest discovery of the age; but remember that that principle was discovered here, developed here, and here proven as a scientific principle and brot to its highest exemplification in restoring health.

In his book, Crile asserts:

- brain is one pole; body is other pole
- between the two is a nerve fibre continuity which connects one to other
- there is flowing from one pole to the other an electric conductivity.

Crile asserts:

- If there is an electric conductivity flowing from one pole to other, we have a living process.
- Sometimes man is a DEAD process. If so, it must be accounted for on same "theory."
- If there is no electric conductivity flowing from one pole to other, we have a DEAD process.
- Sometimes man is neither a LIVING nor DEAD process, but diseased, paralyzed, and it must be accounted for on same "theory."
- If there is a partial flowing from one pole to other, then we have a diseased process.
- This "partial flowing of EC" is due to interference to transmission between one pole and other.
- This interference between poles is the cause of every disease in body.

WHERE do you suppose he found this interference?

Just where it was. It could not be found where it was not. HE FOUND IT IN SPINAL COLUMN where it was.

HOW do you suppose he found these interferences? Could *his* hands feel that which was beyond sensitivity of hands? No! He, too, constructed a mechanical chronic-hot-box heat-finder like one we had.

Within what range did Crile have to come to establish these facts? One-hundredth of a degree centigrade—same as we had established. He used it also; and also located our interference.

What explanation does he give?

- Interference to transmission of electric conductivity causes chemical-reaction.
- Chemical reaction causes increased oxidation.
- Increased oxidation causes chemical combustion.
- Increased chemical combustion produces increased heat.

He admits frankly that electric conductivity is so minute it CANNOT be measured;

- that interference to electric conductivity CANNOT be measured, for same reasons;
- that no scientific means exists to measure chemical reaction, increased oxidation, or chemical combustion.

He affirms there is a scientific means which can measure most minute degree of HEAT. So, in measuring increased heat, he automatically measures backward, chemical combustion, increased oxidation, chemical reaction, and thus interference to transmission of electric conductivity.

Question arises in truth-seeking mind: Is this Chiropractic principle and practice good for this or that — thinking of many names physicians have attached to quality of symptomatology or pathology, which they think they see at periphery — and therein arises THE problem. Inquirer tries to mix PRINCIPLE of Chiropractic with PRACTICE of medicine. He asks: "Is a Chiropractic adjustment good for rheumatism? "Rheumatism" is a name, coined by physicians, to designate a QUALITY of abnormal function he thinks distributed somewhere in body at periphery of nerves; whereas a "Chiropractic adjustment" is an action given for purpose of restoring normal QUANTITY flow of mental impulse between brain and body which, when attained, will restore mechanical action which establishes chemical action, after which no so-called "rheumatism" could exist. As well ask a Chiropractor: "Can you 'adjust a vertebral subluxation' for 'paralysis'?" Chiropractor could not possibly "adjust a subluxation" for "*paralysis*" because when he adjusts a vertebral subluxation he does so because it is occluding a foramen, which produces pressure upon nerves, which offers resistance to transmission of normal quantity flow of mental impulse energy between brain and body. He does not adjust a subluxation because of a supposed-to-be condition at distant end of nerve. He adjusts because it is interfering with transmission at and in spinal column. If you think from top down, you can't think from bottom up. You cannot approach this problem from bottom up, with desire to solve a condition from top down. Either you start at top and come down logically over that line of reasoning, and Chiropractically succeed; or you start at bottom and try to climb up along that conclusion, and medically fail.

There are only TWO diseases in human body: TOO MUCH force at periphery creating one type; TOO LITTLE force at periphery creating other type. When normal quantity is reached, health is result. Physician knows that; and honest physician tells you there is no science in medicine.

Those physicians who know that principle divide their practice into those cases which have TOO LITTLE quality, which they stimulate with something artificial from outside; and those with TOO MUCH quality, which they inhibit or paralyze with something artificial from outside. There are *only* two kinds of drugs — those which stimulate and those which inhibit; two kinds of disease and two kinds of drugs to do two opposite things. That is all there is to the principle or practice of medicine. Physician aims to stimulate paralysis, or paralyze stimulation. That is simple. When physician comes out of college with his head crammed full of education, he carries about two thousand bottles. After he has been in practice a while, he has the inhibitive fluid in left pocket, and stimulative fluid in right pocket.

Chiropractor does not stimulate or inhibit. He merely makes possible a *restoration* of what is *above* point of pressure to what is not *below* pressure. He makes possible flow of energy that exists *above* interference to what is not *below* that interference. He makes possible a life that is *above* resistance to dis-ease that is *below* resistance. Go back to our simple illustration of electric globe and its darkness. Chiropractor turns on button. Turning on button (adjusting vertebral subluxation) makes possible a restoration of flow of commercial electricity that was present in wires *above* turned-off button, to what was not flowing thru wires *below* button that was turned off. In turning on button, he makes physical contact which permits electric current to flow to globe. When current arrives IN globe, light is inevitable result. In turning on button he restores to globe what was in that globe a few moments before (when button was turned on) that which was not in globe (when button was turned off), but will be in globe when button is turned on again. That is all electrician does; that is all human electrician does. He adjusts, and restoration occurs. Chiropractor restores flow and lets inherent intellectuality establish proper *quantity*, so proper *quality* of function is intellectually automatic within us, in inception at brain and in function at tissue cell.

A marked distinction exists between principle of stimulating a diminished quantity, and trying to whip it up to a normal; or inhibiting an excessive quantity by trying to paralyze it down to a normal; and restoring normal quantity from where it is to where it needs be.

Supreme Courts have seen that distinction in science and have ruled on that distinctive difference in science. They have held that Chiropractor does not stimulate or inhibit. In line with these decisions, Supreme Courts have established the Chiropractic principle and practice as a separate and distinct school, apart from and

in no way related to any older "school of medicine." Our cases are tried and have been passed upon by Supreme Courts under our distinctive and different principle and practice.

That surgeon who was here could not understand how a Chiropractor could do anything without knowing all he knew, or doing all he did. We could not understand how he could do anything without knowing all we knew or doing things we did. He could not understand how a Chiropractor got sick well without *diagnosing* disease. He made diagnosis on front side of man, gave prescription of chemicals per mouth, and failed. We made analysis of back, gave adjustment to vertebral interference, and case got well.

We have no desire to be construed as an educated man in his light. He thinks we must know everything he knows, say everything he says, do everything he does; and if we did, we would be educated — as a medical man. We do not want to be educated that way. We think he is ignorant because he does not do things we do. It would be equally as foolish for us to assume he must know everything we know, say everything we say, and do everything we do; and if he did, he would be educated — as a Chiropractor. He does not want to be educated that way. As well insist that before a man can preach a sermon, he must be up on horseshoeing, or vice versa, as to insist that before a man can be a Chiropractor he must study medical subjects and be a physician. It is a question of approach; of difference in principles and practices. We have no desire to be construed to be as a physician, in mind of patient. You will find no clinical thermometer, stethoscope, etc., in our office.

We are often asked: "If vertebral subluxation is cause of all disease, how do you account for germs being cause of many? If cause of all disease is within each person, how do you account for external germs entering man and causing disease? If adjustment of a vertebra in sick person corrects cause of his disease from within, how do you account for necessity of taking something from external to kill germs which are internal, to cure the sick? If cure of all disease comes from within, how do you account for necessity of an anti-vaccine or other external necessity?"

These questions are asked on presumption that principle and practice of medicine are sound.

Step by step, medicine has "progressed" from one theory to another; one experiment to another; one fad to another; each being proved a failure or an excuse to give rise to another equally as sound as of that time, to be construed as foolish when another takes its place. A few years ago, everything was blood

diseases; now it is nerves. Then it was "blood remedies"; now it is nerve tonics. We have gone thru the appendicitis craze; then came removal of all tonsils; now it is removal of bad teeth. Failures always have a bad way of reacting upon themselves. Sincerity of purpose, even tho followed by failure of method, soon gives rise to a new style which supplants it. When every other theory of the causation of disease had failed, germs came upon scene and are now the generally accepted theory. Fifty years from now we will look back upon it as ridiculous, as we now look back upon those which we believed fifty years ago. Theories and practices of medicine run in styles — here today, gone tomorrow. Principles which are true and sound cannot and do not change.

If germs are cause of many diseases, how do you account for some people getting sick and others remaining well — environment, contagion, and infection being same for all? If germs are cause of many diseases, why do not all people get sick who breathe, drink, eat, or possess those germs in or upon their person? If injection or prescribing of some counter-cure from without kills germs, therefore kills cause from without, how do you account for situation where so many people die cured? If injection or prescribing of some counter-cure from without becomes necessary to kill germs, to kill cause from without, how do you account for many people who get well refusing to take such, taking no method of external cure, depending upon internal? If cure of contagious and infectious diseases comes from without and depends upon cure from without within, how do you account for many people who are well without such, who stay well, or get well if sick, without taking such from external?

These questions are asked on presumption that principle and practice of Chiropractic is sound; that there is a principle and practice underlying all situations, which is sound, sensible, sane, and safe to follow under any and all conditions.

Even medicine, with its principle, agrees with Chiropractic in one of our fundamentals. If there is internal resistance, man will resist invasion of what otherwise might seem to create a disease. With internal resistance, we resist invasion; without it, we invite invasion and become a fertile culture ground. All schools are agreed upon this principle. Ten people may live in a home with smallpox. One may be down; two may get down; seven may entirely escape. Why? Medical man says two caught it from one; one exfoliated germs to two. Chiropractor asks: "Why did seven escape same exfoliation?" Chiropractor says that seven are strong, healthy, resisting; are not a fertile culture ground. Germs are scavengers, refuse eaters; live upon dead waste matters that gather

in the body. As the place, so the dead tissue, so the scavenger. Like begets like. Each diseased organ feeds and breeds its characteristic scavenger. Tuberculosis bacilli are found with tuberculosis scavenger matter, etc. Germs are man's friend; they are janitors who keep internal hallways and alleyways open for life traffic. If diseased conditions warrant, be glad you have them, for you'd be infinitely worse off if you didn't.

Chiropractor accepts in good faith the principle of internal resistance. We have the only antidote, the only vaccine — and that is the natural antidote that is created within. Chiropractor does not deny existence of germs when diseases are present; he denies they are a cause, admitting they are an effect. He denies necessity for external antidotes. Chiropractors and medical men alike admit this principle of internal resistance as sound. Chiropractor makes it possible in practice, from inside out, naturally; medical man tries to make it possible from outside in, artificially. When medical man admits this principle of necessity for internal resistance and tries to produce it by external injection, he contradicts himself. When Chiropractor affirms this principle of necessity of internal resistance and practices that principle by permitting natural internal resistance, he confirms his consistency in principle and practice.

By time medical man on outside of sick patient kills germs inside with chemical from outside, given inside, man will die cured from inside, which not only destroys outside germ life but also inside human life that tries to flow from inside to outside, because of outside killing influence of drugs taken inside. Chiropractor makes it possible for resistance to be naturally builded from inside to outside. He adjusts vertebral subluxation, opens occluded foramen, releases pressure upon nerves, permits restoration of transmission of normal quantity flow of internal life to external organs; which, when received, builds them strong; therefore are resistant, naturally, without artificial or unnatural external aid.

Chiropractor does not deny presence of germs when diseases are present;

- affirms their presence;
- denies they are a cause;
- affirms they are an effect, a result, a by-product;
- denies necessity of killing them;
- affirms necessity for their presence as long as disease exists;
- denies necessity for external antidotes, vaccines, or viruses;
- affirms necessity for internal resistance and makes it possible.

IF germs could cause disease, think what would be necessary to kill off every male and female germ to prevent doctors, much less anybody else, from spreading contagion and infection. We are not convinced that physicians believe that which they advocate. It seems to be good practice for laymen, yet no good for physicians to follow. You must not spread; yet they spread in billions, daily. It seems a good excuse for physicians, which they have successfully legalized, to restrain public with, to foster theories unsupported with proof upon an unsuspecting public. When they prove by actions they believe what they say, then is time enough for us to believe they are sincere in advocating that theory. When they talk one principle and contradict it with an antipodal principle in action, we find ourself in doubt as to which of the contradictory principles they believe in. It takes a tremendous amount of schooling to make a people accept a wrong premise as a right one. They force it upon you, willy-nilly, by legislation. It does not take much education to understand a simple right truth such as Chiropractic. It needs no bolstering by forcible regulation to ask the public to think and reason for themselves on system and doctor of their choice.

A slip on the snowy sidewalk in winter is a small thing. It happens to millions. A fall off a ladder in the summer is a small thing. That also happens to millions. Slip or fall produces a subluxation. Subluxation is a small thing. Subluxation produces pressure on nerve. Pressure is a small thing. Pressure cut off flow of mental impulses. Decreased flow of mental impulse is a small thing. Decreased flowing produces a dis-eased body and brain. THAT is a BIG thing to THAT man.

Multiply that sick man by a thousand, and you control the physical and mental welfare of a city. Multiply that man by a million and you shape the physical and mental destiny of a state. Multiply that man by one hundred twenty-two million and you forecast and can prophesy the physical and mental status of a nation.

So, the slip or fall, subluxation, pressure, flow of mental impulses, and dis-ease are BIG enough to control thots and actions of a nation.

Now comes a man — and any one man is a small thing. This man gives an adjustment. Adjustment is a small thing. Adjustment replaces subluxation. That is a small thing. Adjusted subluxation releases pressure upon nerves. That is a small thing. Released pressure restores health to a man, and that is a BIG thing to THAT man.

Multiply that well man by a thousand, and you step up physical

and mental welfare of a city. Multiply that well man by a million and you increase efficiency of a state. Multiply that well man by one hundred twenty-two million, and you have produced a healthy, wealthy, and better race for posterity.

So, adjustment of subluxation, to release pressure upon nerves, to restore mental impulse flow, to restore health is BIG enough to rebuild thots and actions of the world.

The idea that knows cause, that can correct cause of dis-ease, is one of the biggest ideas known. Without it, nations fall, and with it nations rise. The idea is the biggest we know of. Isn't it a pity that such a big idea, now, must suffer from sick physical and mental ideas of sick physical and mental bodies which it aims to improve?

We hear a great deal of medical propaganda about "low educational standards" and "necessary educational qualifications" for various professions. When will that time arrive when the future must bow to present? Present is being ousted by future which is crowding us today. Horse tried to establish a standard of speed for automobile; stage coach tried to set standard for Pullman; kerosene tried to prevent electric globe; medicine builded a high legal wall to keep out Chiropractic. Physicians are constantly quoted, saying our educational standards are low. They are — medically. They are not — Chiropractically. Our courses are more than sufficient to create and build Chiropractors. Altho suffering at hands of medical educators on this question, Chiropractors in their turn have created another wall for future generations of same kind and character. They asked legislatures for legislation; created an artificial and stimulated educational standard far in excess of any necessity to produce Chiropractors; far in excess of that which most of them possess — the present squeezing out the future.

Altho our father was discoverer of Chiropractic; altho we were born in it, lived it all our life, have developed it from a twaddling theory into an exacting science, we could meet the educational standards of but few of the Chiropractic State Boards; yet these Board members come and sit at our feet and learn from a man whom they would examine and refuse the right to save human lives.

History is not concerned with amount of education one has; all it asks is that he does the thing he set out to do.

You hold yourself out as a Chiropractor — be one! You set yourself up as being able to find a subluxation — do so! You claim you can get the sick well — do so! Beyond that, progress cares not whether you know chemistry, diagnosis, pathology, etc., if you get sick people well. Medical man's educational standard says you must know all his things to be able to do anything, Chiropractically.

Many Chiropractors think they must know all medical man knows to be as incompetent as he, before they can know Chiropractic subjects to be Chiropractically competent. It has been our observation that men who cry for higher education are men who have least of it. Men who are practical, who are delivering, never ask for a fence to keep another out. Elbert Hubbard said, "That man is best educated who is most useful."

Addenda A.

Any man can so fastidiously and meticulously glue his mind to a concentrated microscopical study of a certain scientific hypothesis that he can actually become obsessed with it. We realized that more than ever after having read *THE BISHOP MURDER CASE* (Charles Scribner's Sons) wherein, on pages 275-278, the motive for that scientific murder is vividly explained. To make this issue plain, we quote that motive exposition because it can explain why physicians are physicians; why they continue to be physicians; how they justify everything they do, believing that what they think, say, and do is right.

"'Is it surprising,' asked Vance, 'that a man dealing in such colossal, incommensurable concepts, within the individuals of human society are infinitesimal, might in time lose all sense of relative values on earth, and come to have an enormous contempt for human life? The comparatively insignificant affairs of this world would then become mere petty intrusions on macrocosmos of his mental consciousness. Inevitably such a man's attitude would become cynical. In his heart he would scoff at all human values, and sneer at the littleness of the visual things about him. Perhaps there would be a sadistic element in his attitude; for cynicism is a form of sadism. . . .'

"'But deliberate, planned murder!' objected Markham.

"'Consider the psychological aspects of the case. With the normal person, who takes his recreations daily, a balance is maintained between conscious and unconscious activities; the emotions, being constantly dispersed, are not allowed to accumulate. But with the abnormal person, who spends his entire time in intense mental concentration and who rigorously suppresses all his emotions, the loosening of the subconscious is apt to result in a violent manifestation. This long inhibition and protracted mental application, without recreation or outlet of any kind, causes an explosion which often assumes the form of deeds of unspeakable horror. No human being, however intellectual, can escape the results. The mathematician who repudiates nature's laws is nevertheless amenable to those laws. Indeed, his rapt absorption in hyperphysical problems merely increases the pressure of his denied emotions. An outraged nature, in order to maintain her balance, produces the most grotesque fulminations—reactions which, in their terrible humor and perverted gaiety, are the exact reverse of the grim seriousness of abstruse mathematical theories. The fact that Sir William Crookes and Sir Oliver Lodge—both great mathematical physicists—became confirmed spiritists, constitutes a similar psychological phenomenon.'

"Vance took several deep inhalations on his cigarette.

"'Markham, there's no escaping the fact; these fantastic and seemingly incred-

ible murders were planned by a mathematician as forced outlets to a life of tense abstract speculation and emotional repression. They fulfill all the indicated requirements; they are neat and precise, beautifully worked out, with every minute factor fitting snugly in place. No loose ends, no remainders, apparently no motive. And, aside from their highly imaginative precision, all their indications point unmistakably to an abstrusely conceptive intelligence on the loose — a devotee of pure science having his fling.'

"'But why their grisly humor?' asked Markham. 'How do you reconcile the Mother-Goose phase of them with your theory?'

"'The existence of inhibited impulses,' explained Vance, 'always produces a state favorable to humor. Dugas designates humor as a "detente" — a release from tension; and Bain, following Spencer, calls humor a relief from restraint. The most fertile field for a manifestation of humor lies in accumulated potential energy — what Freud calls *Besetzungsenergie* — which in time demands a free discharge. In these Mother-Goose crimes we have the mathematician reacting to the most fantastic of frivolous acts in order to balance his superserious logical speculations. It's as if he were saying cynically: "Behold! This is the world that you take so seriously because you know nothing of the infinitely larger abstract world. Life on earth is a child's game — hardly important enough to make a joke about." And such an attitude would be wholly consistent with psychology; for after any great prolonged mental strain one's reactions will take the form of reversals — that is to say, the most serious and dignified will seek an outlet in the most childish games. Here, incidentally, you have the explanation for the practical joker with his sadistic instincts. . . .

"'Moreover, all sadists have an infantile complex. And the child is totally amoral. A man, therefore, who experiences these infantile psychological reversals is beyond good and evil. Many modern mathematicians even hold that all convention, duty, morality, good, and the like, could not exist except for the fiction of free will. To them the science of ethics is a field haunted by conceptual ghosts; and they even arrive at the disintegrating doubt as to whether truth itself is not merely a figment of the imagination. . . . Add to these considerations the sense of earthly distortion and the contempt for human life which might easily result from the speculations of higher mathematics, and you have a perfect set of conditions for the type of crimes with which we are dealing.'"

Further Explanation of The Specific

A Chiropractor is known by the ability he demonstrates in his office. He may be in the Bobby Jones class and play in the 60's, or he may belong to the "tall sticks" and play "Civil War golf" — out in 61 and back in 65. He may be listed amongst the Babe Ruths or he may dub his ball, cuss the caddy, damn the weather, break his clubs, and come to the 18th hole with a 142.

A golfer would soon be playing 200 if he stopped between holes to play checkers, dominoes, cribbage, bridge; play another hole, then decide to take a swim and read a book. Baseball players could take two days to play a game if they diverted their minds to things other than baseball. Those who play a "Hole in One" — whether it be golf, baseball, or Chiropractic — specialize and centralize thot, time, money, effort, and ability.

No golf or baseball player could reach championship by using a shot-gun method. No Chiropractor can play championship Chiropractic with a mind roving about and eyes looking everywhere, using a shot-gun club or bat which aims to hit everything everywhere, or thinking it better to give a shot-gun adjustment aiming to move 'em all, every day for many months. Pawing air does not concentrate, focalize, or land on specific spot which needs concentrated delivery to make a "hole-in-one" or a "home run" to health.

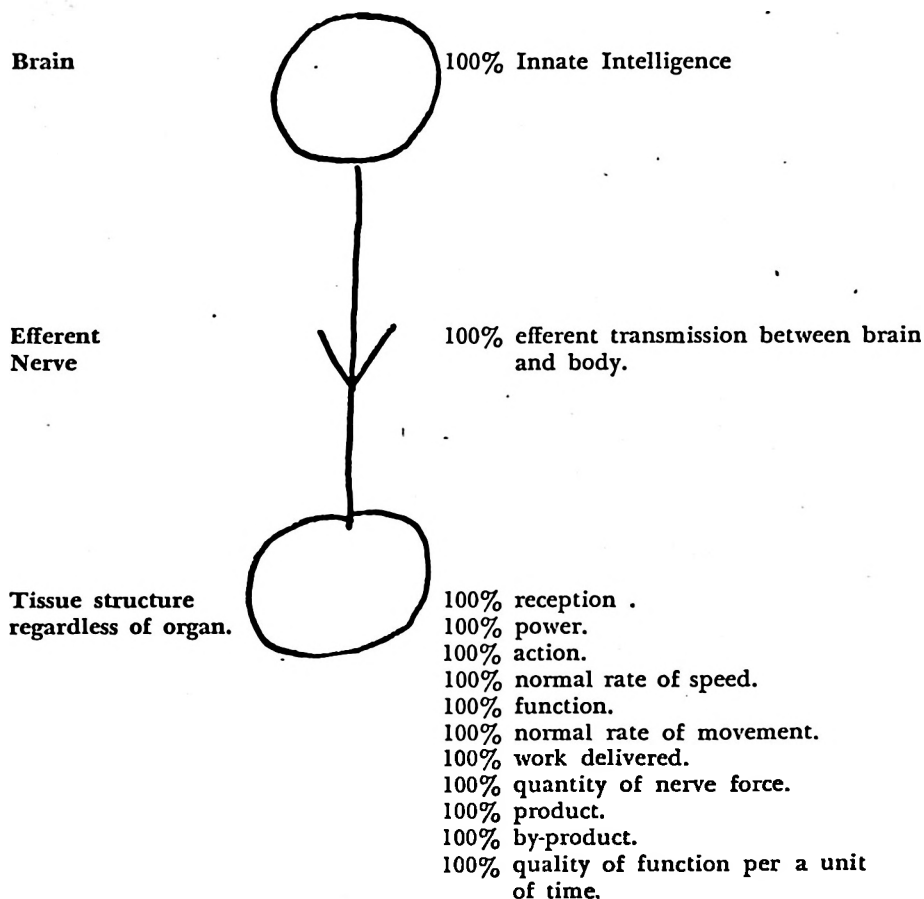
Chiropractic is just another profession to many. We have those who study, apply skill and art. They have trained minds and muscles to centralize and specialize. They go into a case as Babe Ruth played baseball or Bobby Jones plays golf — to see how little they can do to see how much they can do to accomplish their objective; to see how FEW strokes or drives they can make to cover nine innings or eighteen holes. There are "chiropractors" who believe that patients want to be fussed over and fuddled with; coddled and fooled; have time wasted over them; want MUCH used, even tho useless, in preference to having little used to get them well. Patients do want much. This is because of two opinions: first, they think they need much to get anything; second, they do not know what they need and some practitioners take advantage of this lack of knowledge. They do want to get well. If convinced that little would accomplish this, where much would fail, they would take little. Baseball fans would "booh" a player who wasted an hour to make first base, as would golf enthusiasts hiss at a player who wasted an hour to play one hole in twenty-four strokes, knowing public would not walk ten steps to see those players. All the world went wild and traveled distances to see Bobby Jones win a championship or the great Bambino swat a "homer."

There are Bobby Jones' and Babe Ruths in Chiropractic. They labor to perfect brains and bodies; study every ripple of every muscle, to see how few adjustments they can give, to as few places, to accomplish the great objective — getting the sick well. Less they do, if done right, greater will be results. More they do, if done wrong, less will be results. Some "chiropractors" put in hours, sweating, bathing, shocking, rubbing, tinkering, diagnosing, treating sick; call it all "chiropractic"; and fail in their objective. If a ball player took an hour's time and made twenty swipes and failed to make a home run, we'd say he was ignorant and incompetent and not up on his game. If a golf player took an hour's time and made twenty strokes to make one hole, we'd say he was ignorant and incompetent and not up on his game. If a "chiropractor" plays AT treatments with shot-gun methods which are not Chiropractic, he proves in exact reverse ratio that he doesn't know Chiropractic

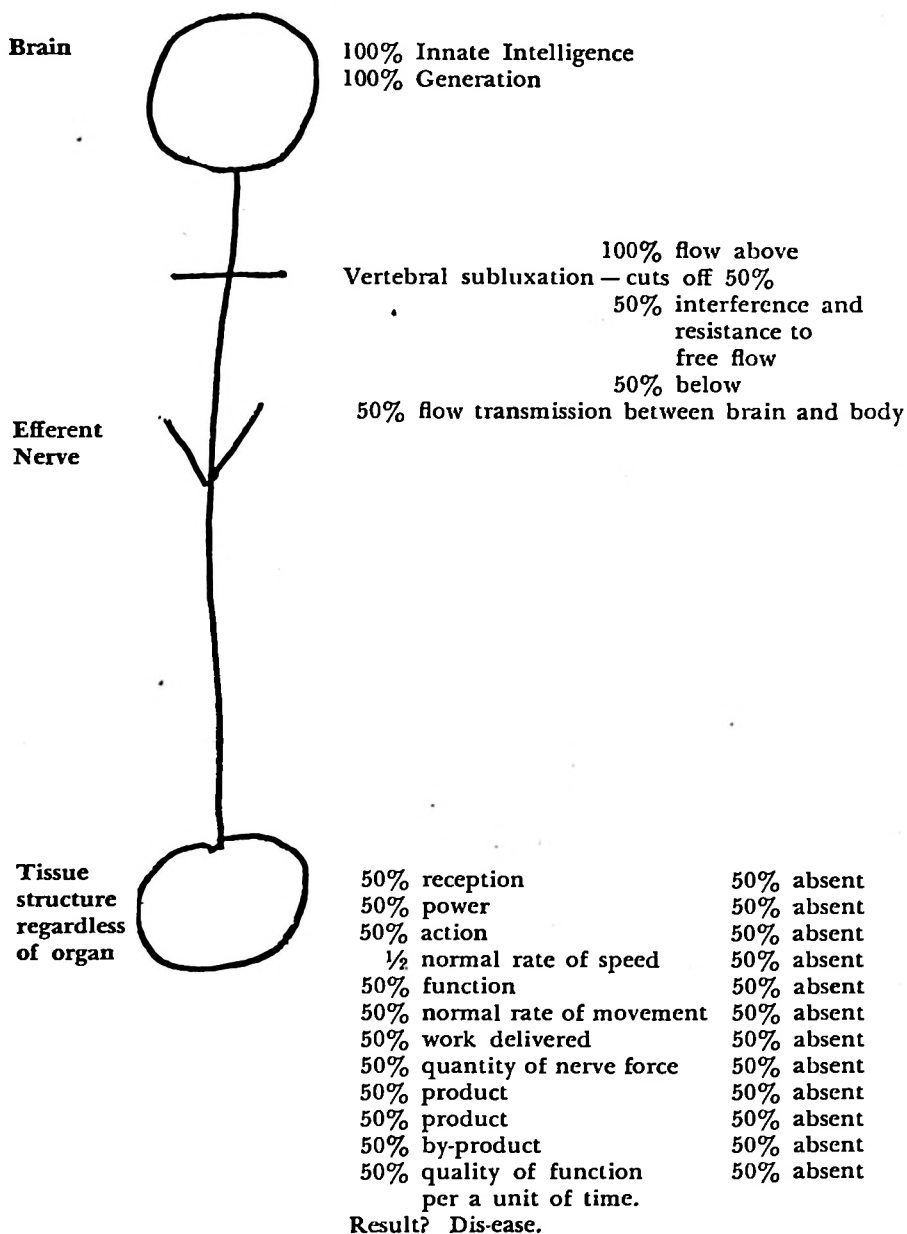
and can't deliver it. As he knows it, he does it. As he does not do it, he does not know it. A competent Chiropractor knows Chiropractic and will see how little he can do to see how much he can accomplish. More than likely, he will adjust ONE place in neck, ONE day. This is because he has located THE specific subluxation and adjusted it to exclusion of fol-de-rols.

The purpose of this story is to educate patient as to what Chiropractic is, what it is not; what it does, what it does not do, and how it does it, so that patients may intelligently ascertain a competent Chiropractor by what equipment he has in his office and how he talks, and with what he ascertains the subluxation and adjusts it. It is patient's right to insist upon Chiropractic and nothing more — if he desires to get well.

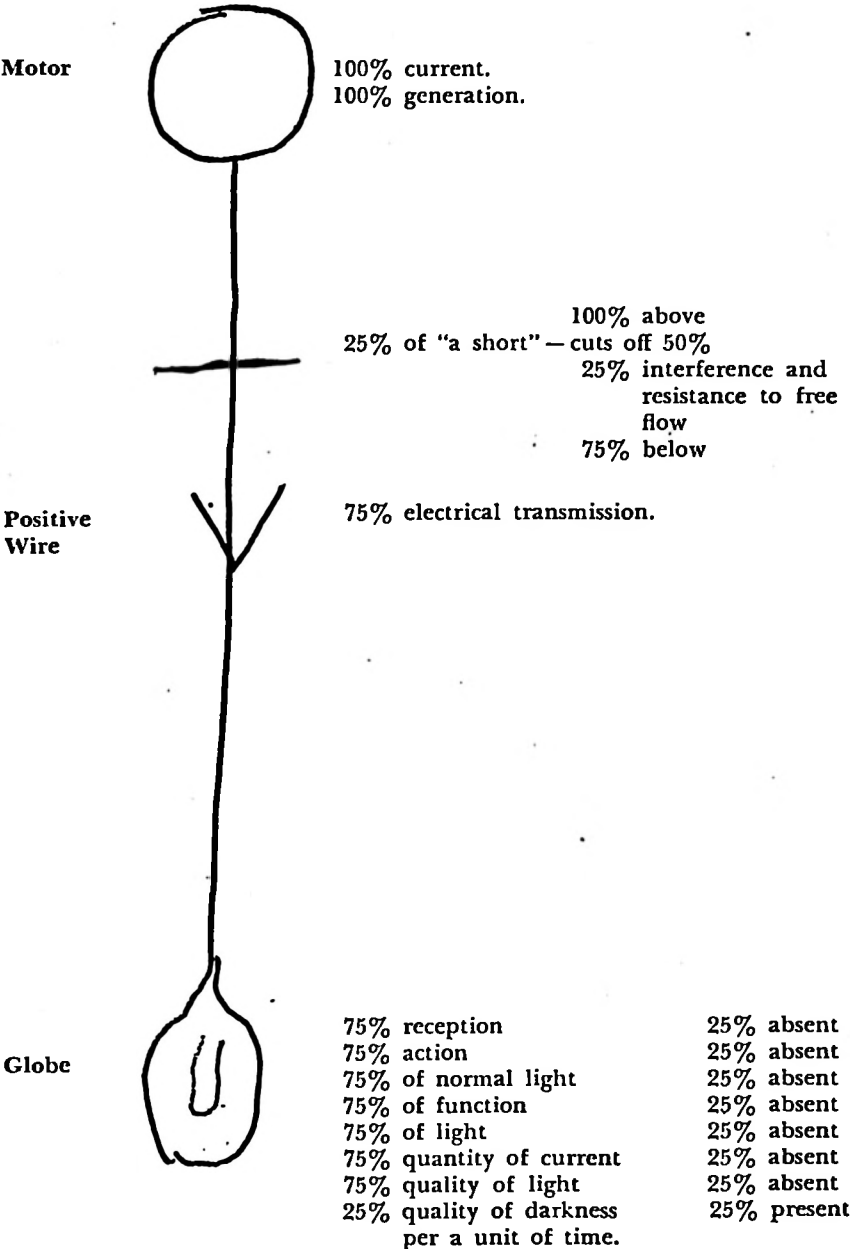
SCHEMATIC DRAWING OF FUNCTION. (1)



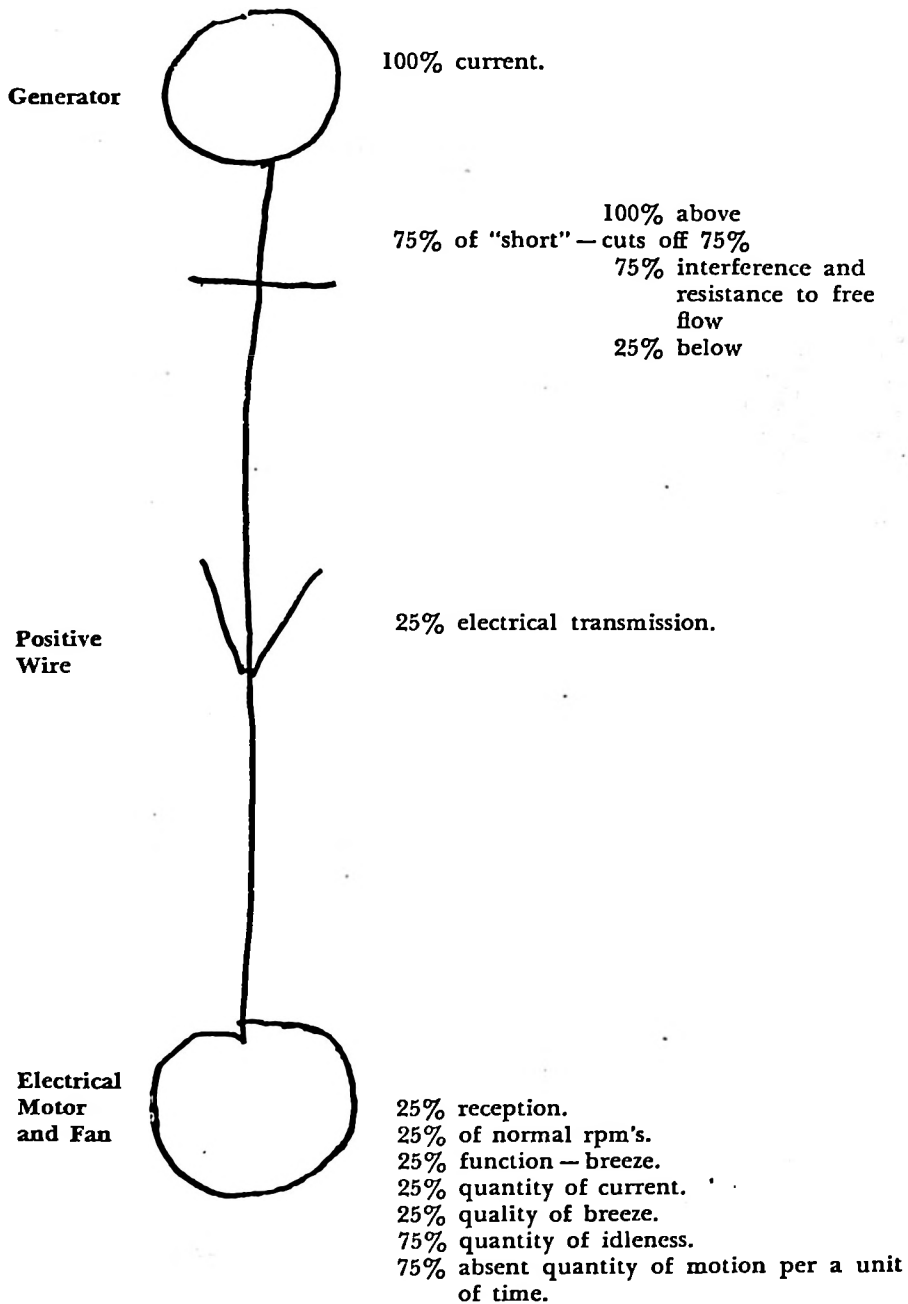
SCHEMATIC DRAWING OF INTERFERENCE TO FUNCTION. (2)



SCHEMATIC DRAWING OF COMPARISON WITH AN ELECTRIC LIGHT GLOBE AND LIGHT. (3)



SCHEMATIC DRAWING OF COMPARISON WITH AN ELECTRIC FAN. (4)



SCHEMATIC DRAWING OF CAUSE OF ALL DIS-EASE. (5)

BRAIN

100% Innate Intelligence.
100% Mental Impulse or
Nerve Force.

EFFERENT
NERVE

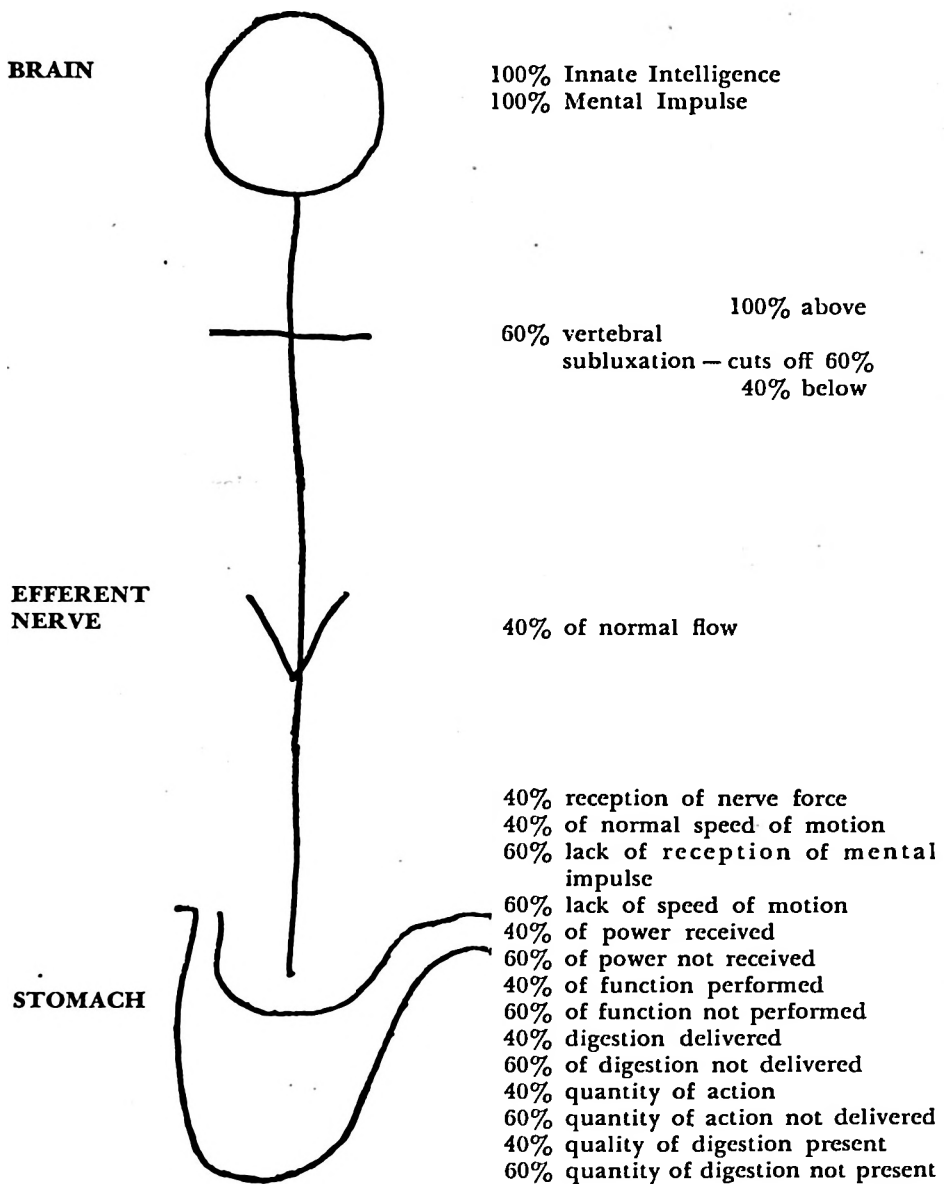
100% above
33% subluxation — cuts off 67%
33% below
67% interference and
resistance to
free flow

STOMACH

67% reception of mental impulse,
33% absent.
67% normal speed of motion, 33%
absent.
67% normal speed received, 33% ab-
sent.
67% of function performed, 33% ab-
sent.
67% of digestion delivered, 33% ab-
sent.
67% of quantity of action, 33% ab-
sent.
67% of quality of function, 33% ab-
sent per a unit of time.
Stomach working 1/3 slower, produc-
ing 1/3 less product, per unit of time.

Indigestion results.

SCHEMATIC DRAWING OF ACTION AND RE-ACTION AGAINST INGESTION OF DRUGS. (6)



Stomach, working 60% slower than normal, producing 60% less function, per unit of time.

Now comes a drug ingestion into stomach.

How can stomach, BY ITSELF, with 40% received act to restore 60% absent?

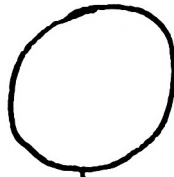
Stomach is now called upon TO REACT against 60% absent in addition to react against additional load of the drug.

How can it do either?

SCHEMATIC DRAWING RAISING THE QUESTION "CAN INNATE BE FORCED?" (7)

BRAIN

100% INNATE INTELLIGENCE
100% Mental impulse.



45% Vertebral subluxation.
45% Interference and resistance to normal flow.
100% above
—— cuts off 45%
55% below.

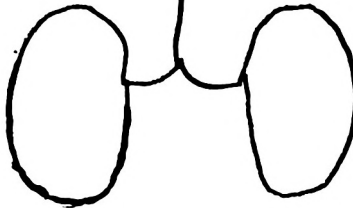


EFFERENT NERVE

55% reception
55% normal speed of motion
45% lack of reception of mental impulse
45% lack of speed of motion
55% of power received
45% of power not received
55% of function performed
45% of function not performed
55% of inhalation and exhalation delivered
45% of inhalation and exhalation not delivered
55% quantity of action
45% quantity action not delivered
55% quality of function present
45% quality of function not present.



LUNGS



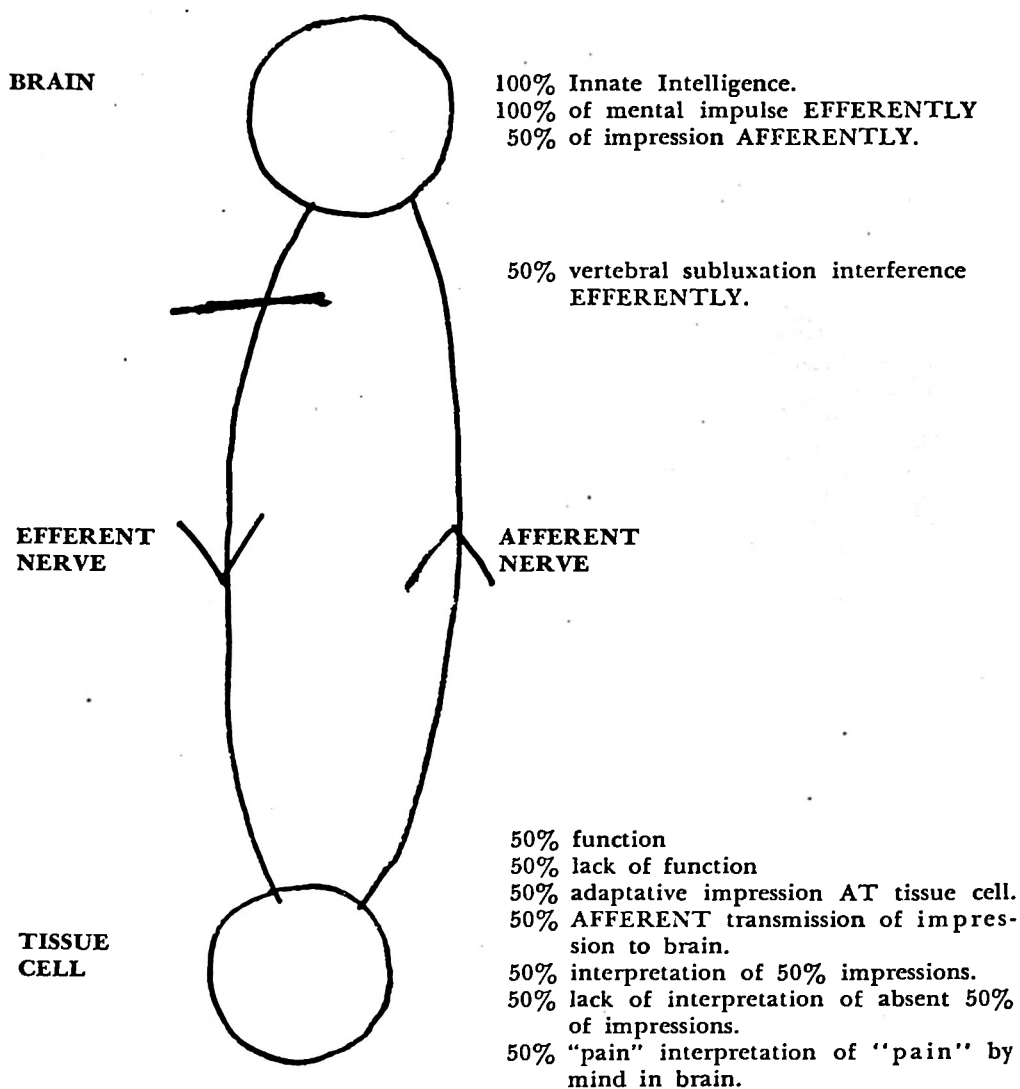
HOW can irritation, stimulation, inhibition, goading or whipping of 55% present bring back, restore or increase ITSELF permanently to 100%?

Can health be re-established in lungs WITHOUT the absent 45%?

Can normal rate of speed of tissue cell structure motion of inhalation and exhalation be returned without the absent 45%?

If so, HOW?

SCHEMATIC DRAWING ILLUSTRATING "PAIN" AND WHAT "PAIN" IS. (8)



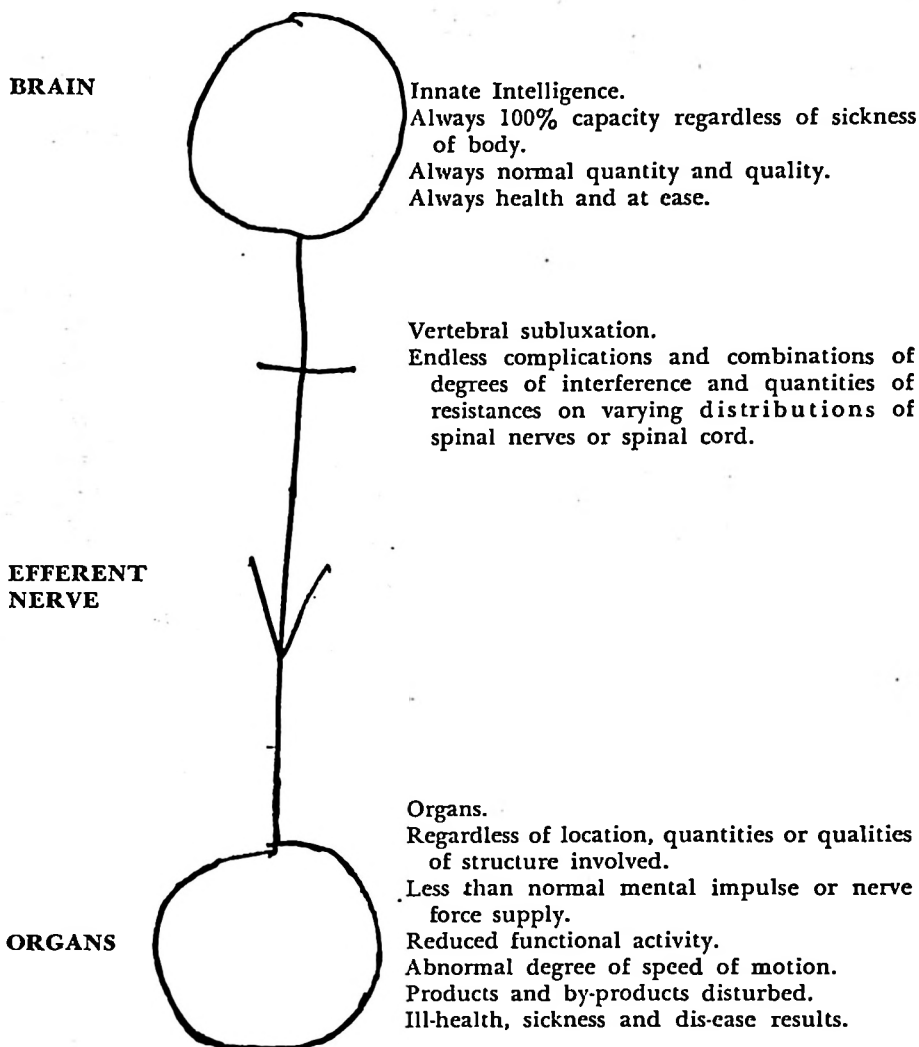
HOW can "pain" be stopped?

1. By blocking off 50% of impressions flowing afferently from tissue cell to brain. This can be done manually, by manipulation, thermally, chemically, electrically, digital pressures, etc.

2. By restoring absent 50%, to 100% of normal flow efferently.

"Pain" is an internal natural MENTAL interpretation of % of impressions received from an external abnormal physical condition.

SCHEMATIC DRAWING FOR A SPECIFIC FOR THE CORRECTION OF THE CAUSE OF ALL DISEASE. (9)



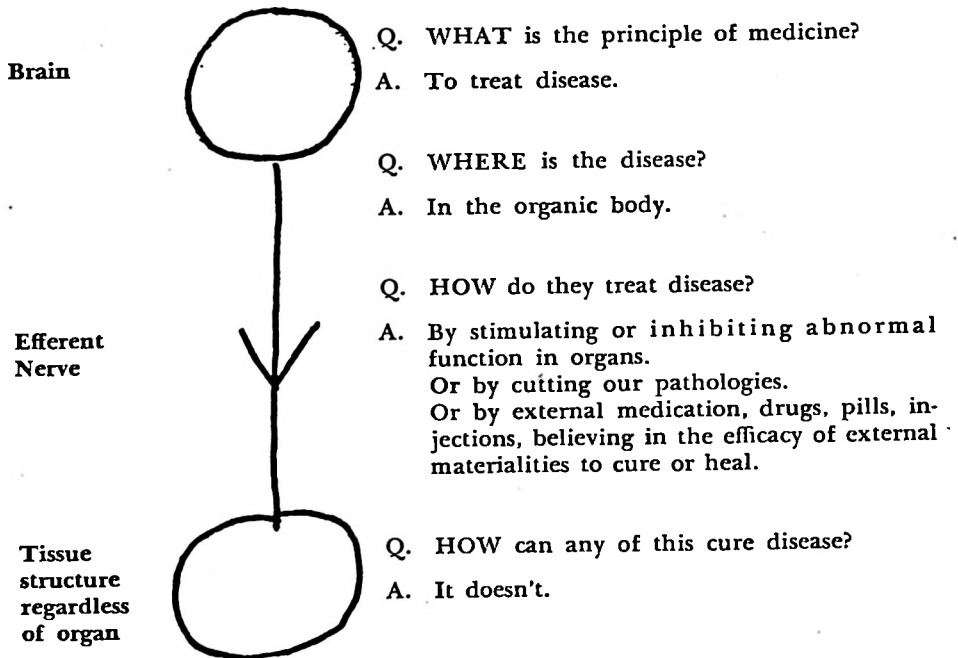
Adjustment of vertebral subluxation, at right time, right place, in right manner, will open intervertebral occlusion, release pressure upon spinal nerves or spinal cord, permit a restoration of normal quantity flow of mental impulse or nerve force between brain and body, Innate Intelligence and function; and, other issues being equal, the patient should and would get well. Nothing more than this need be done.

The principle and practice of Chiropractic IS a "panacea," "cure-all" and a specific because it IS applicable to ALL dis-ease because there is but ONE dis-ease regardless of organ, condition or location.

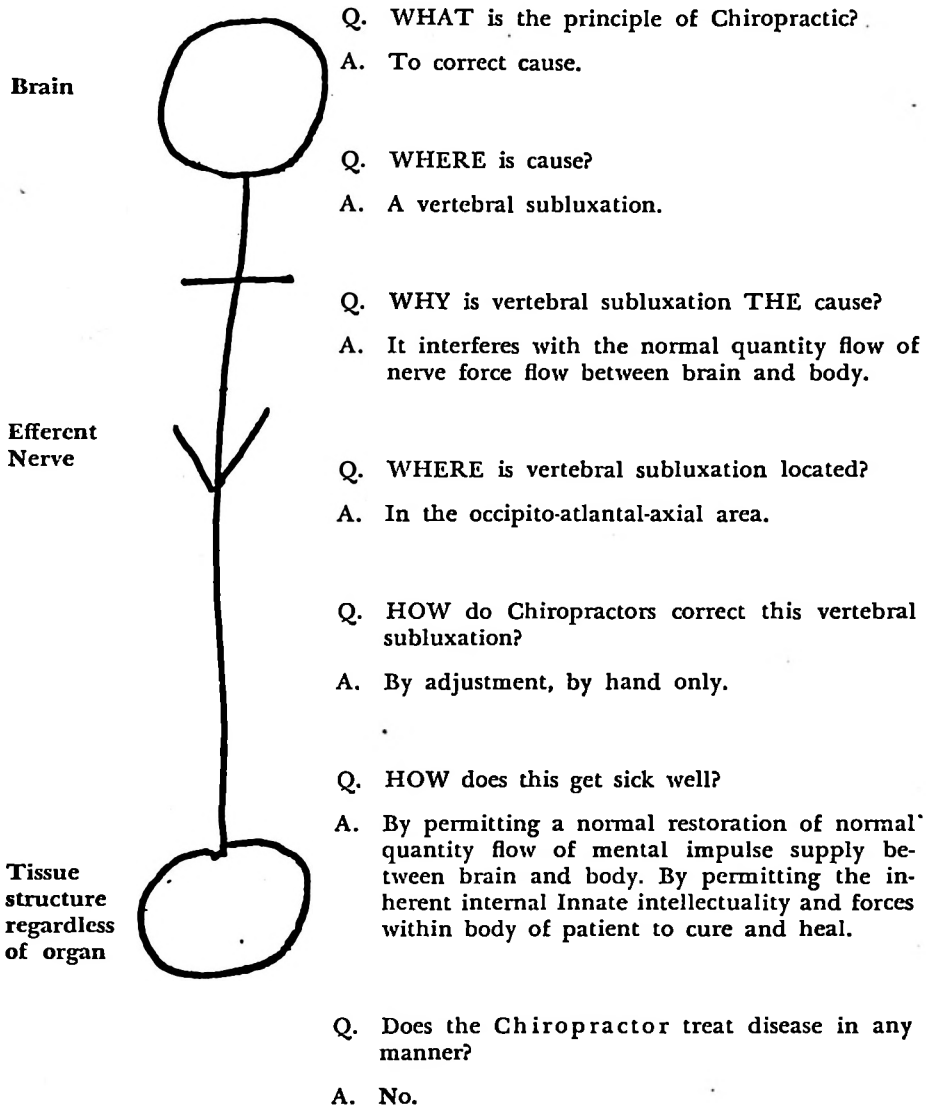
This is not to say, however, that 100% of all types of dis-eases can or will get well at the hands of 100% of Chiropractors. There are imponderables, such as (a) the condition may be too chronic (b) the dis-ease may be too destructive

to permit repair (c) the age of the case might be beyond justification (d) time allowed by patient to get well might be too short. These elements rest entirely within the superior judgment of the Innate Intelligence in the patient. And (e) subject to all cross-sections of humanity the Chiropractor might be incompetent in locating the right vertebral subluxation and inefficient in adjusting same.

SCHEMATIC DRAWING OF MEDICAL PRINCIPLE AND PRACTICE. (10)



SCHEMATIC DRAWING OF CHIROPRACTIC PRINCIPLE AND PRACTICE. (11)



The Story of THE TRUSCOTT SYSTEM

(A Report on Demonstration and Tests Made in
The B. J. Palmer Chiropractic Clinic, July 1st to 24th, 1945.)

What is the Truscott system? What claims are made for it?

The JOURNAL OF THE CALIFORNIA CHIROPRACTIC ASSOCIATION, April, 1945, contains an article titled: THE PHYSIOLOGICAL BASIS OF THE TRUSCOTT PHENOMENA, by Dr. Granville K. Frisbie.

The following are excerpts from same:

"When researchers in pure science at Yale University a little over a year ago furnished conclusive evidence that demonstrated continuous waves of discharging energy emitting from the organs of Meissner IN THE FINGER TIPS, the Truscott phenomena, although it antedated this work by several years, became a more understandable and hence more convincing means of demonstrating certain neuro-physiological conditions capable of being produced upon the human subject. The Yale men by means of DELICATE ELECTRICAL MEASURING DEVICES, easily duplicated in even a modest research laboratory, showed that THE VOLAR SURFACES OF CERTAIN FINGERS WERE IN A CONSTANT STATE OF DEPOLARIZATION—PROVIDED THE CIRCUIT WAS COMPLETED. The amount of the discharge, expressed in millivolts, WAS OBSERVED TO BE OF MARKED DIFFERENCE IN EACH DIGITAL SURFACE AND VARIED IN POLARITY FROM FINGER TO FINGER.

"The phenomena of Truscott utilizes the above facts AS A POINT OF ORIGIN, that is, AS A BEGINNING of its processes and procedure. It takes into account the known laws of Haller and Claude Bernard governing the actions of the individual sarcomeres composing the muscular systems of the body. In isotonic contraction the sarcomere is foreshortened in the presence of ELECTRICAL energy. Work done by Adrian on isolated conduction of nerves and work performed on frogs and on vertebrate animals is too well known to need further discussion here, both of which have demonstrated the electrical sensibilities of muscle and nerve tissue."

"ACTUAL PROGRESS IN RELATION TO PURELY SPINAL WORK IN THE CHIROPRACTIC FIELD DURING THE PAST TWO DECADES HAS BEEN MEAGER. It appears to have been confined to the development of the precisional three dimensional radiograph, the micro-dynamometer, the neurocalometer, the neurocalograph and associate instruments and perhaps several more of a more or less MINOR nature. These, however competently they may be used, have been at a loss to be able to allow for the constant but shifting muscular tonus of the local muscular systems attaching to vertebrae, PERMITTING AN INCOMPLETE ADJUSTMENT AND CORRECTION OF SUCH VERTEBRAE WHICH AT ANY GIVEN TIME COULD NOT FURNISH THE DOCTOR WITH PROOF INDISPUTABLE THAT THE LESION IN QUESTION HAD BEEN COMPLETELY QUASHED. Nor has it been generally feasible to x-ray prior to each adjustment administered. We are all familiar with these AND OTHER DISCREPANCIES OF INSTRUMENTATION OF WHATEVER KIND, which can be said without prejudice to the

valuable instruments we do possess. Until the advent of Truscott there has always entered finally and IRREVOCABLY the human element of the practitioner himself as well as the vagaries of the patient.

"Truscottization of the patient, if we are permitted to coin a word, permits a last minute diagnosis (or analysis, according to the preferences of the reader) of the present and immediate internal factors causative of the spinal nerve blockage in such a way as brooks *NO EXTERNAL MARGIN OF ERROR*. These internal factors are numerous and vital to success and are easily discernible by means of Truscott's phenomena. It may be of importance to note that the removal by manual correction of any areas of subluxation when applied to the lower spinal region elicit no effect upon lesions at a higher level, but when *THE HIGHER LEVEL IS INVESTIGATED AND SUBLUXATIONS THERE ELIMINATED, THOSE OF LOWER ORIGIN ALSO DISAPPEAR* not only in appearance but in fact. This fact is based upon sound and logical neurological data familiar to everyone when the total nervous system, its embryological origin and distribution, is considered. Working up the spine, the higher levels were rigidly investigated and were found to eliminate lesions of all lower origin. This happens to be in agreement with the doctrine and findings of schools that specialize on the higher centers. Unfortunately *HERETOFORE* there was evolved *NO HIGHROAD OF PRACTICAL MANUAL ELIMINATION* of conditions some have known and others have suspected to be present in these difficult and highest subluxable levels.

"*THE REAL PROGRESS OF CHIROPRACTIC IN THE WORLD OF TODAY HAS BEEN EXCEEDINGLY SLOW AND MOREOVER PAINFUL WHEN ONE CONSIDERS THE ADVANTAGES IT PRESENTS IN COMPARISON WITH THE OLDER SYSTEMS OF HEALING*. Likewise, it appears to this writer, will the Truscott phenomena spread by slow but continuous infiltration. It will be slow because its application is effectively denied to any but the most meticulous, painstaking, and truly careful operators, and like all observation on the human anatomy must fulfill the laws of what I am pleased to call the precisional approach, which the casual or careless doctor lacks in the development of his professional personality. To those, however, who fulfill such demands, the reward will be rich indeed, and promises to be of such magnitude that the world will, at a time not too distant, be glad to recognize a new dignity and worth in a profession which tends to be disorganized and unsure. This new approach to an old problem seems certain to elevate the profession which has given it birth, because, and we venture to hope that that day will arrive soon, it now has well within its grasp a real laboratory method that (1) can be tested and repeated at will, (2) can give consistent results on any given number of patients and, (3) can reduce the number of failure cases and partial failure cases to the vanishing point."

Claims for The Truscott System

San Jose, California, Feb. 2, 1944.

"Dear B. J.:

"I have everything that I told you and more and will welcome a scientific analysis of my work in any way you may see fit. I am sure it will stand the test of time. After all, getting sick people well is the greatest test of any technic. I am doing that consistently without variation from the technic as explained.

*****"

L. L. Truscott, D.C."

Santa Monica, California, May 20, 1944.

"Dear Dr. Palmer:

"The TRUSCOTT ANALYSIS will stand up under the light of SCIENTIFIC examination for the following reasons:

"1. It follows the law of neutricity utilizing a constant value which cannot err.

2. It agrees with the spinograph in every case to my knowledge.

3. It agrees with the neurocalometer in readings and surpasses that instrument in delicacy because the heat problem is OUT.

4. It proves what YOU HAVE PROVED AND FOUGHT FOR — the ONLY subluxation is of atlanto-occipito-axial origin.

"Next year is our Golden Anniversary — our Golden Jubilee year — OUR YEAR OF YEARS at the PSC, cannot it be MORE — the marking of A NEW ADVANCE for Chiropractic students in the APPLICATION of our science?

"Dr. Truscott is ready and waiting to come to Davenport when the moment is opportune and at your best convenience.

"May I again recommend that his work be thoroughly sifted?"

(Signed) Granville K. Frisbie, D.C., Ph.C.

How is Truscott Work to be Tested?

Following letter from Dr. Frisbie directly raises question as to HOW we here will test values of Truscott system:

Santa Monica, California, May 29, 1945.

"Dear Dr. Palmer:

"Doctor Truscott and myself have just concluded a conference between ourselves to discuss the best means in which to present this work. Inasmuch as our trip will represent nearly a month away from home and considerable expense to us personally, we would like to know if you would care to outline to us, in only a general way, your intentions in the matter.

"We would greatly appreciate if you would state again, owing to the lapse of time since our last meeting together, THE EXACT STANDARD OF MEASUREMENT BY WHICH THE WORK WILL STAND OR FALL.

"In the event of its failure, we are quite sure of the outcome; however, in the event of its success would you please state again for us just what you would be willing to expect to do?

"While WE WISH TO LEAVE YOU COMPLETE FREEDOM OF ACTION, ON YOUR PART, we all think it fair and just to ASK YOUR POSITION BEFORE we undertake the proposed trip east. Our aim, of course, is to secure its adoption by you to be taught to undergraduates in the Palmer School of Chiropractic, should this course of action be indicated after your full and thorough investigation.

"We hope to make the July 2nd appointment with you, and will await your reply, following which we look forward to securing reservations for the journey."

(Signed) Granville Frisbie, D.C., Ph.C.

Let us recapitulate some of the statements:

"While we wish to leave you complete freedom of action, on your part, *****."

To this, we replied as follows:

May 31, 1945.

"Dear Doctor Frisbie:

"My tentative plan WAS TO COMPARE THE KNOWN FINDINGS HERE WITH YOUR KNOWN FINDINGS—and see where we come out.

"The KNOWN FINDINGS HERE ARE SPINOGRAPHS, NCM-NCG-NTM GRAPHS IN A SHIELDED AND GROUNDED BOOTH, PLUS THE GRAPHS MADE WITH THE TIMPOGRAPH. This would be done ON A SERIES OF CASES to establish OUR known facts.

"Your known findings would be to measure the energy flow, its potential and direction, volume and value 'emitting from the organs of Meissner in the finger tips' *** because *** 'The phenomena of Truscott utilizes the above facts as a point of origin, that is, as a beginning ****.' (See your article in the Journal of the CCA.) By comparing the generation of volume of energy in the brain with the quantity reaching the various 'volar surfaces' OF THE FINGERS, we can determine whether the potential is positive or negative, whether it is normal or abnormal, dependable or not. We could then do the same WITH THE TOES OF BOTH FEET, showing that the expression on 'volar surfaces' of fingers and toes are either normal or abnormal, dependable or not.

"You could then use your system ON THESE CASES, ON WHICH WE HAVE PREVIOUSLY ESTABLISHED OUR FINDINGS HERE, CHECK BACK AFTERWARDS after an adjustment is given, and by checking back as post graphs, we could establish your findings to whatever they were.

"AFTER THIS HAS BEEN DONE, WE COULD COMPARE THE TWO SETS OF FINDINGS, OURS WITH YOURS, and see what sound conclusions we would reach as to which was the most stable in proving the adjustment of a vertebral subluxation, with the opening of the occlusion, with the releasing of pressures, AND the restoration of mental impulse supply—for, after all, the last is THE vital factor we all air to establish to get sick people well. The timpograph graph wave patterns WILL establish THAT fact as no other means CAN establish it.

"By following this general procedure ON A SERIES OF CASES, for a period of two or three weeks, we can then KNOW as far as it is possible for we humans TO know by scientific tests and procedures WHICH ARE ACCURATE AND RELIABLE AND DEPENDABLE IN THE WORLD OF SCIENCE to prove the findings by comparison.

"Other tests may come to mind upon your part or ours between now and then that would elaborate the tests. But, this is just a review as I have been thinking the vital issue thru."

"B. J. Palmer, D.C., Ph.C."

Let me recapitulate some of the statements:

"My tentative plan was to COMPARE THE KNOWN FINDINGS HERE WITH YOUR KNOWN FINDINGS *** AND SEE WHERE WE COME OUT."

We mention:

"The known findings here are spinographs, NCM-NCG-NTM graphs *****." "This would be done on a series of cases *****." "After this has been done, we could compare the two sets of findings, ours with yours, and see what sound conclusions we would reach as to which was the most stable."

To this, Dr. Frisbie replied:

Santa Monica, Calif., June 4, 1945.

"Dear Doctor Palmer:

"Both of your letters of May 31st have been received and noted carefully.

"I AM IN COMPLETE AGREEMENT AS TO YOUR OUTLINE OF PROCEDURE IN MAKING AN EVALUATION OF THE TRUSCOTT ANALYSIS.

"Might I add that it might be well TO TAKE A SERIES OF CASES ACCORDING TO YOUR STANDARD PROCEDURE, and a series according to Truscott AND COMPARE THE TWO IN EVERY SCIENTIFIC WAY. Our hope is not so much to improve YOU as to improve the quality of the work possible by your GRADUATES of The PSC.

"*****

"If you do not hear further, we will be in your city at the time stated.

"With warmest personal regards, I am

"Granville K. Frisbie, D.C., Ph.C."

Suffice to say:

"I am in complete agreement as to your outline of procedure in making an evaluation of the Truscott analysis."

He fully agrees "to take a series of cases according to your standard procedure, and a series according to Truscott AND COMPARE THE TWO IN EVERY SCIENTIFIC WAY."

To fully clarify the matter, I answered as follows:

June 7, 1945.

"Dear Doctor Frisbie:

"Am of the opinion that no great number of cases would add any further findings than a limited number. I suggest NOT OVER TEN for two reasons: 1st, it will cut down the time of your staying here, and, 2nd, it will save my time which is extremely crowded all the time and more so now than ever before.

"I suggest you write direct to the Hotel Blackhawk or Hotel Mississippi for room reservations."

"B. J. Palmer, D.C., Ph.C."

Dr. Earll Expresses His Convictions

Los Angeles, Calif., June 11, 1945.

"My dear B.J.:

"In re the splendid invitation to attend along with Drs. Frisbie and Truscott, the test of Truscott's unusual findings in Chiropractic. It is appreciated no end. The fact is, I regard it the opportunity of a lifetime, but we are finding the transportation an almost insurmountable problem.

"In my personal case, there are other problems or rather circumstances which just about preclude my being able to sit in on this 'unusual' proceeding. I regret that I cannot attend, as had intended.

"However, be it, this man Truscott is one of those unusual fellows who sees Chiropractic first, in any case, in any circumstance. He is not a business man, a fly by nighter, an opportunist, a wild claim-er, a jumper at conclusions, but

instead a hard worker, a consistent digger-outer of facts and who has done so under most unusual circumstances.

"He seems to have proven, up an entirely different alley, the hard fact that the upper cervical segments are responsible for ill being as well as well being of our physical selves.

"HE ONLY ASKS THAT YOU GIVE HIM ENOUGH ROPE TO HANG HIMSELF AND REHANG HIMSELF WITH MORE ROPE IF NECESSARY, IN ORDER THAT HE MAY PROVE AGAIN THAT CHIROPRACTIC REALLY CLICKS EVERY TIME.

"He is not a self seeker in any sense, but does hope that fullest credit where credit be due, be recognized, let the chips fall where they may.

"His confidence in you is about 100% in rating, so for a start off the indications are better than good. A new era in Chiropractic is here ??

"From this end of the line, I am sure that B.J. will get the surprise of his life and perhaps how one lone wolf of a D.C. could have started at scratch and finally developed the thing into tangible workable shape.

"It took a lot of hard work and thought, with bull dog tenacity, for over a period of a few years to reach the now 'near climax'. Cannot understand how come he was ridiculed, rather than encouraged by certain HIO boys in his neighborhood, all along the line he was sniped at—in fact heaped with insult—a one thing that has helped upset Chiropractic in its life time, as we know. At least I believe all of us know exactly where your heart is in this 'ornery' Chiropractic situation."

(Signed) J. C. Earll.

Dr. Frisbie Tells Us

In the spirit of fairness, we have copied the entire letter:

Santa Monica, Calif., August 1, 1944.

"Mr. Ralph Evans,
The Palmer School of Chiropractic,
Davenport, Iowa.

"Dear Ralph:

"In your letter to me of July 1st, you invite me to tell you further concerning the analytical findings of Dr. L. L. Truscott of San Jose. This I shall attempt, in as brief and compact a form as possible.

"Truscott graduated ABOUT 1924 AND SINCE HAS CARRIED ON A STRICTLY MERIC PRACTICE. He is one of those who never digressed, not even to the point of using a heat lamp or vibrator.

"Over the years he permitted various and sundry to 'adjust' UP AND DOWN HIS SPINE. Finally he fell sick, and reached the point where he considered giving up his work. He used to lock his office door and hope no one came along, spending his time on a sofa, in pain and agony. Finally he decided if he was to be helped he must help himself. LIKE SO MANY MERIC CHIROPRACTORS, HE NEVER MADE THE GRADE IN HIO WORK, but also like many, his experience taught him that UNLESS ATLAS-AXIS WERE ADJUSTED, NOBODY GOT WELL.

"Experimentation followed. He had observed, over the years, that MOST EVERYONE had a functional short leg; that every sick person showed this phenomena, that every really well person never did. He fell to measuring his

own short leg via the abductor tubercles on the femurs just above the knees. Also he began making light contacts with his fingers ABOUT THE ATLAS REGION where he was always in pain.

"Thus he found that by proper light finger-tip contact he could alter the muscular contraction of the back muscles AND CONTROL MOMENTARILY the shortness or correct length of the legs. This caused him to reason further that IF NERVE PRESSURE EXISTED AT ATLAS HIS CONTACT WOULD DRAW UP ONE LEG, IF IT WERE FREE OF PRESSURE, THE LEG WOULD GO TO NORMAL. From this he worked out SPECIFIC contacts, finding that where the bone had moved anteriorly from his light contact, IF THERE WAS A SUBLUXATION, the muscles would contract and the leg come up from one to two inches. The startling and valuable finding was that UNDER LIKE CONDITIONS LIKE RESULTS OBTAINED. This led to a veritable goose chase in order to eliminate the pesky variables. Metal, he found, reversed the results, making them unreliable. Even teeth fillings would do this — any metal at all on the body. He found simple ways of obviating this and finally evolved a system which WILL DUPLICATE IN ONE MINUTE HOURS OF X-RAY RESEARCH AND NEUROCALOGRAPH READINGS. Based on natural laws IT NEVER FAILED HIM. This is the essence but not the full flower of his work. UNDER HIM, X-RAYS WILL ALWAYS BE VALUABLE AND NECESSARY for many obvious reasons, some being ease in adjusting knowing the positioning of vertebrae, location of bone pathology, checking findings, etc.

"Not being able to adjust ALL the malpositions of an atlas, let us say an atlas is AIR-A, he BROKE IT DOWN INTO ITS COMPONENT PARTS AND ADJUSTED EACH SEPARATELY, but when he is finished, by his analytical system, proof is forthcoming that ALL the pressure is reduced. THERE IS NO ONE OUTSIDE B.J. WHOM I PERSONALLY HAVE OBSERVED WHO CAN DO THIS, i.e., remove ALL the nerve pressure at ONE adjustment. Truscott can. The results are quite astounding, as you might surmise. Cases get well quicker, retracing is less, cases not now responding to our work will respond. I have had wonderful success with psoriasis and with anterior ganglionitis, acute (shingles) which is what Daddy Hender suffered from when I was a student. I cleared up a case in a man about his age in two weeks and the case was BAD.

"Before I close, here are a few of Truscott's observations. (Maybe some are mine). Truscott finds no fault with the NCM or X-rays or with HIO EXCEPT that the average graduate cannot employ them successfully ENOUGH. They work fine, but few master it. This you should know to be true — at least B.J. admits it IN PRIVATE. Truscott's work changes nothing of the philosophy, science, or art of Chiropractic except its immediate application, which is simple. IT DOES, OR WILL IN TIME ANTIQUATE THE NCM because his application of the body's own nerve force and peripheral potential is more accurate. The NCM has done and is doing a good job and need not be ashamed. The crux is that this work needs to be gone over with a finetooth comb and evaluated. B.J. has promised as much — we are waiting for the call.

"If there is anything further I can tell, don't hesitate to call on me. Am ready and willing to come to Lyceum but the railroad says there is no room on trains for me. Gas and tires are out. Hence, will see you after the shooting is over."

"Granville K. Frisbie, D.C."

Adjustments Given by Dr. Truscott

Test Case No.	1 - 6	adjustments	All from R.	(Ax PL (At ASL
	2 - 5	adjustments	All from R.	Ax PL
	3 - 4	adjustments	3 from R.	At ASR
	4 - 12	adjustments	8 from R. 4 from L.	At ASR
	5 - 6	adjustments	5 from R. 1 posterior	Ax PL
	6 - 5	adjustments	All from R.	Ax PL
	7 - 4	adjustments	All from R.	Ax PR At ASR
	8 - 5	adjustments	2 from R. 3 from L.	Ax PL
	9 - 4	adjustments	All from R.	Ax PR
	10 - 2	adjustments	1 from R. 1 from L.	At ASL

Summary: 53 adjustments, or attempts at adjustments, were given to 10 test cases within a period of approximately 2 weeks.

Spinograph Listings

Before and After "Adjustment" by Truscott System
As Delivered by Dr. Truscott

Test Case No.	1. - Case 2268 — Chas. Oyer	Pre - Ax PL Post - At ASL
	2. - Case 2269 — John Fisk	Pre - Ax PL Post - Ax PL
	3. - Case 2270 — Don Pharaoh	Pre - At ASR Post - At ASR
	4. - Case 2271 — Ed Trebel	Pre - At ASR Post - At ASR - Ax more PR
	5. - Case 2272 — Geo. Vaughn	Pre - Ax PL Post - Ax PL - worse
	6. - Case 2273 — Ethel Wood	Pre - Ax PL Post - Ax PL - worse

7. - Case 2274 — Miss London	Pre - Ax PR Post - Ax-PR - At ASR
8. - Case 2275 — Wm. Heronemus	Pre - Ax PL Post - Ax PL
9. - Case 2276 — Mrs. Miller	Pre - Ax PR Post - At ASL
10. - Case 2277 — E. Marker	Pre - At ASL Post - At ASL

Summary: 4 remain the same
2 remain same direction, but worse
2 change from axis to atlas
2 remain the same, plus addition of atlas or axis.

Full-Length Spinographs

Test Case No. 1 — practically normal
2 — practically normal
3 — practically normal
4 — proves the rule
5 — proves the rule
6 — proves the rule
7 — proves the rule
8 — proves the rule
9 — proves the rule
10 — proves the rule

NCM Readings

Before and After "Adjustment" by Truscott System
As Delivered by Dr. Truscott

Test Case No.	1 - Neurocalograph - 7/11/45	Pre - 1/2 pt. L. Post - 3 pt. R.
	2 - - 7/5/45	Pre - No break Post - 2 pt. R. - 1 pt. L.
	3 - - 7/7/45	Pre - No break Post - 1 pt. L. 3 pt. L.
	4 - - 7/6/45	Pre - 1/2 pt. R. Post - Clear
	5 - - 7/7/45	Pre - No break Post - 1 pt. L.

6 -	- 7/7/45	Pre - 5 pt. R. Post - 1½ pt. R.
7 -	- 7/9/45	Pre - 2 pt. R. Post - 1 pt. L.
8 -	- 7/10/45	Pre - ½ pt. R. Post - 3 pt. R.
9 -	- 7/9/45 - 7/11/45	Pre - 1½ pt. R. Post - 3 pt. R. 3 pt. R. 1 pt. R. 1 pt. R.
10 -	- 7/9/45	Pre - No break Post - 1 pt. R.

Adjustments Given as Reported by Test Cases

Test Case No. 1 — Chas. Oyer — No. 2268.

Question: On first day, what adjustment was given?

Answer: Break on atlas.

Question: From left or right?

Answer: I think it was right.

Question: What followed this?

Answer: Then he gave me an atlas on side posture table from right. I think he hit atlas a second time, because he did not move it the first time. That is all the adjustments I had the first day.

Question: Who was the doctor?

Answer: Dr. Truscott.

Question: What was done on the second day?

Answer: I got a break on atlas, and rotary on axis, from right.

Question: What table was that given on?

Answer: Break on Hylo table; rotary sitting up.

Question: What was done the third day?

Answer: Nothing was done. I checked clear all of the rest of the time.

Resumé of Adjustments Given by Dr. Truscott

1st day 1 — break on atlas, from right
2 — rotary on axis, from right

3 — atlas. Side posture. From right.
4 — tried atlas second time; didn't move first time.
2nd day 1 — break on atlas from right
2 — rotary on axis from right
Breaks on split head-piece — Hylo table
Rotary sitting up.
Checked "clear" balance of 3 days.
Spino — Ax PL or At ASL

Test Case No. 2 — John Fisk — No. 2269

Question: On the first day, what adjustment was given?

Answer: Break on Hylo table. Axis rotary from right, and atlas right on side posture table.

Question: Who gave those?

Answer: Dr. Truscott.

Question: What was done on second day?

Answer: I checked clear.

Question: Third day?

Answer: Axis rotary on right — that was all. On fourth day I checked clear.

Resumé of Adjustments Given by Dr. Truscott

1st day 1 — break. Hylo table.
2 — axis. Rotary from right.
3 — atlas. Side posture table, from right.
2nd day "checked clear."
3rd day 1 — axis. Rotary from right.
4th day "checked clear."
5th day — axis. Rotary from right.
Spino — Ax PL.

Test Case No. 3 — Don Pharaoh — No. 2270

Question: What adjustment was given on first day?

Answer: First adjustment, I was seated — lower cervical rotary — about sixth cervical, from right.

Question: Then what followed that?

Answer: Next adjustment was on axis lamina, on side posture, from right. Next adjustment was atlas right, side posture, recoil. Last adjustment was supine on Hylo, contacting both transverses at 5th cervical, driving it posterior from front.

Question: Who was the doctor?

Answer: Dr. Truscott.

Question: Second day?

Answer: I checked clear ever since then.

Resumé of Adjustments Given by Dr. Truscott

- 1st day 1 — lower cervical rotary; 6th cervical from right.
 2 — axis lamina, side posture, from right.
 3 — atlas, side posture, recoil, from right.
 4 — supine. Hylo table. Contacting both transverses, 5th
 cervical, posterior, from anterior of neck.

“Checked clear” ever since.

Spino — At. ASR.

Test Case No. 4 — Ed Trebel — No. 2271

Question: What adjustment was given on first day?

Answer: Atlas rotary, supine, on Hylo table, from both directions. Axis, sitting up, from both directions, rotary. Then they gave me atlas recoil, on side posture table, from right; and three recoils on atlas from right, until they said it checked clear.

Question: Who was the doctor?

Answer: Dr. Truscott.

Question: Second day?

Answer: I just had the axis rotary from both directions.

Question: Which was first?

Answer: I believe he adjusted from left first.

Question: Third day?

Answer: Same thing — and I have checked clear since.

Resumé of Adjustments Given by Dr. Truscott

- 1st day 1 — atlas rotary. Supine. Hylo table. From left to right.
 2 — atlas rotary. Supine. Hylo table. From right to left.

3 — axis, sitting up. Rotary, from left to right.
4 — axis, sitting up. Rotary, from right to left.
5 — atlas recoil. Side posture table. From right.
6-7-8 — 3 recoils, "until it checked clear."

2nd day 1 — axis rotary, from left to right
2 — axis rotary, from right to left

3rd day 1 — axis rotary, from left to right
2 — axis rotary, from right to left

Checked clear, since.

Spino — At. ASR

Test Case No. 5 — George Vaughn — No. 2272

Question: What adjustment was given on first day?

Answer: Rotary on atlas, right. Rotary on axis, right. Axis posterior. Toggle recoil on atlas for laterality, from right.

Question: Who was the doctor?

Answer: Dr. Truscott.

Question: Second day?

Answer: They did not do anything.

Question: Third day?

Answer: Rotary, atlas and axis, from right.

Resumé of Adjustments Given by Dr. Truscott

1st day 1 — atlas, rotary, from right.
2 — axis, rotary, from right.
3 — axis, from posterior.
4 — atlas, from right.

3rd day 1 — atlas, rotary, from right.
2 — axis, rotary, from right.

Spino — Ax. PL.

Test Case No. 6 — Ethel Wood — No. 2273

Question: What adjustment was given on first day?

Answer: Supine position, contact taken under my chin and occiput, from right; Hylo table. Rotary on atlas from right.

Question: Second day?

Answer: Lateral atlas from right — side posture.

Resumé of Adjustments Given by Dr. Truscott

- 1st day 1 — supine. Contact under chin and occiput, from right.
Hylo table.
2 — rotary, atlas, from right.
- 2nd day 1 — atlas from right — side posture.
- 3rd day 1 — axis rotary, from right.
2 — atlas break.

Spino — Ax. PL.

Test Case No. 7 — Miss London — No. 2274

Question: What adjustment was given on first day?

Answer: Break on atlas from right; rotary on axis from right; then recoil on side posture table, atlas from right.

Question: Second day?

Answer: Break on atlas from right. Third day, clear.

Resumé of Adjustments Given by Dr. Truscott

- 1st day 1 — atlas break, from right
2 — axis rotary, from right
3 — atlas, recoil, from right
- 2nd day 1 — atlas break, from right

Spino — Ax PR or At ASR.

Test Case No. 8 — Wm. Heronemus — No. 2275

Question: What adjustment was given on first day?

Answer: Rotary on atlas from right, sitting position. Then he took me on side posture table and gave me a toggle recoil from right. Then back on Hylo table, left rotary on axis lamina. Toggle recoil on axis from left.

Question: Second day?

Answer: Only a rotary on Hylo table, on my back, from left.

Resumé of Adjustments Given by Dr. Truscott

- 1st day 1 — atlas rotary, from right
2 — atlas recoil, from right — side posture.
3 — axis lamina. Left rotary. Hylo table.
4 — axis recoil, from left.

2nd day 1 — atlas rotary — Hylo table — from left, supine.
Spino — Ax. PL.

Test Case — Mrs. Miller — No. 2276

Question: What adjustment was given on first day?

Answer: Recoil from right, on side posture table. Rotary on axis, and then he took it again and gave me another rotary, taking the whole neck from right.

Question: Second day? Break on atlas, right, on Hylo. I have checked clear, since.

Resumé of Adjustments Given by Dr. Truscott

1st day 1 — atlas recoil, from right — side posture table.
2 — axis rotary, from right.
3 — axis and "the whole neck". Rotary, from right.
2nd day 1 — atlas break, from right — Hylo table.
Checked clear since.

Spino — Ax. PR.

Test Case No. 10 — Evangeline Marker — No. 2277.

Question: What adjustment was given on first day?

Answer: Break on atlas on Hylo table, from left. Recoil, side posture, from right.

Resumé of Adjustments Given by Dr. Truscott

1st day 1 — atlas break, from left — Hylo table.
2 — atlas recoil, from right — side posture.

Spino — At. ASL.

Timpographs of Fingers and Toes — Frisbie

Test 1

Inasmuch as Dr. Truscott emphasizes importance attached to "the volar surfaces of certain fingers were in a constant state of depolarization *** provided the circuit was completed," we deemed it a sound test to take timpograph wave patterns of the three fingers of each hand, of both Drs. Truscott and Frisbie. (For reference to fingers, see CCA article incorporated as a part of this report).

To carry the test a step further, we deemed it advisable to make a similar graph wave pattern of three toes of each foot, of both Drs. Truscott and Frisbie, to possibly show that graph wave patterns of fingers and toes might have a similarity.

(Listing attached to graphs).

Analysis of Dr. Frisbie — Test No. 1

- 1st graph — Brain pattern. Pattern of generation. Practically normal.
- 2nd graph — Brain pattern for legs. Slightly below normal in quantity.
- 3rd graph — Second finger, right hand. Rhythmic. One decided rhythm per second. Approximately nine below normal. Shows one strong pulsation, per second, balance weak.
- 4th graph — Third finger, right hand. Weaker pattern than for second finger. More normal.
- 5th graph — Fourth finger, right hand. Approximately normal pattern.
- 6th graph — Second toe, right foot. Approximately normal pattern.
- 7th graph — Third toe, right foot. Approximately normal pattern.
- 8th graph — Fourth toe, right foot. Pattern abnormal. Five rhythms per second. 50 per cent below normal.

A break-down analysis shows second and third fingers of right hand abnormal in quantity flow. Second and third fingers are abnormal compared to fourth finger.

3rd graph is of efferent flow. 4th is afferent. 5th indicates neither.

Inasmuch as all timpographs evaluate, calibrate and measure only quantity flow, by comparison, it does not indicate, suggest, or prove one or the other being positive OR negative as suggested by Dr. Truscott.

In the 2nd, 3rd, and 4th patterns, we have decided heart beat pattern.

Timpographs of Fingers and Toes — Dr. Truscott

Test 2.

- 1st pattern — Brain. Generation. Irregular, abnormal, slightly below normal in quantity flow. When generation is below par, then efferent flow balances.
- 2nd pattern — Brain pattern for toes. Irregular, abnormal, slightly more below normal than pattern 1.
- 3rd, 4th, 5th patterns — Finger patterns quite normal, indicating a steady flow. None of these patterns, however, indicate any positive or negative phase in their patterns.

8th pattern — Fourth toe, right foot. Indicates irregularity, abnormal.

Timpographs Based on Brain Generation

Direct to Fingers Only — Frisbie

Test 3.

The 2nd, 3rd, and 5th patterns are markedly dissimilar to each other. If the conclusion is sound that one finger is positive, the other negative, and they alternate with each other, then the pattern should be distinctive in character. 2nd pattern is quite abnormal. 3rd pattern is quite regular. 5th pattern is irregular and abnormal but to the extent of the 2nd.

This test clearly shows any conclusion based on sense of feeling with alternate fingers would be in direct contrast with each other, not in any sense balancing or offsetting each other.

This test also shows that the right hand is far more normal than is the left. We would suggest Dr. Frisbie use only his right hand in his work, because that hand proves to be far more normal than the left.

Timpographs Based on Brain Generation

Direct to Fingers Only — Truscott

Test 4.

1st pattern is normal.

2nd pattern is abnormal, irregular, and with eleven oscillations per second.

3rd pattern is abnormal, with six oscillations per second.

Balance of patterns approximately normal.

Analysis shows that two abnormal fingers are offsetting one normal of left hand.

Same suggestion would apply to Dr. Truscott as to Dr. Frisbie. Right hand is more nearly normal and should be the one to be preferred in use.

Timpographs Based on Brain Generation

Direct to Toes Only — Frisbie

Test 5.

1st pattern — Brain generation normal.

2nd, 3rd, 4th, 5th, 7th patterns — All abnormal, each differing in its character of abnormal quantity, showing that no reliability could be used if toes were used in test work.

Timpographs Based on Brain Generation Direct to Toes Only — Truscott

Test 6.

1st pattern — Brain generation normal.

2nd pattern — Abnormal, differing from all others.

These two tests show just what they show — that if we were working with same, it would be one abnormal against two normal.

General Conclusion

Timpograph wave patterns of left hand of both Drs. Truscott and Frisbie show that each finger of left hand is irregular with other. Left hand, therefore, would be an abnormal hand to use in making any analysis of sublaxations.

Timpograph wave patterns of both right hands show a far more normal pattern of one finger with each other. Would suggest, then, that in this work you use ONLY the RIGHT hands for making analyses. This might be more difficult, especially when working on left side.

Because of the differences between fingers of left and right hands, this may account for the necessity of adjusting so irregularly from left to right, or right to left sides, so frequently. This might be avoided if right hand only were used on BOTH sides.

Timpograph Comparative Tests

Test Case No. 1 — Chas. Oyer

A comparison of the timpograph of 7/3 with 7/11 shows no improvement in 4th superior zone. It does show a decided improvement at atlas. There is an improvement at axis.

1 same — 2 better.

Test Case No. 2 — John Fisk

Comparison of timpograph of 7/3 with two taken on 7/13 shows little improvement in 23rd superior zone; some improvement at atlas zone; some improvement at axis zone; no improvement at 23rd inferior zone.

2 bad — 2 good.

Test Case No. 3 — Don Pharaoh

Comparison of timpograph of 7/7 with two taken on 7/12. There is no improvement on 24th superior zone; atlas is worse; axis is worse; 5th inferior remains about the same; 24th inferior changed the pattern without decided improvement.

5 bad.

Test Case No. 4 — Ed Trebel

Comparison of timpograph of 7/5 with 7/14. 6th superior is worse; atlas slightly improved; axis improved; 6th inferior improved; 11th inferior, same.

2 bad — 3 good.

Test Case No. 5 — George Vaughn

Comparison of timpographs of 7/6 with 7/16. No improvement in 13th superior zone; no improvement at atlas; no improvement at axis; no improvement in 13th inferior zone; slightly worse at 20th inferior zone.

4 bad — 1 worse.

Test Case No. 6 — Ethel Wood

Comparison of timpograph of 7/6 with 7/17. 22nd superior same; atlas worse; axis improved; 22nd inferior improved.

1 same — 1 worse — 2 better.

Test Case No. 7 — Miss London

Comparison of timpograph of 7/7 with 7/14. 23rd superior zone worse; atlas improved; axis improved; 23rd inferior zone about the same.

1 bad — 1 worse — 2 better.

Test Case No. 8 — Wm. Heronemus

Comparison of timpograph of 7/9 with 7/16. 13th superior zone improved; atlas same; axis same; 13th inferior zone worse; 19th inferior zone improved.

2 better — 2 same — 1 worse.

Test Case No. 9 — Mrs. Miller

Comparison of timpograph of 7/7 with two on 7/17. 10th superior worse; atlas worse; axis same; 10th inferior same.

2 same — 2 worse.

Test Case No. 10 — Evangeline Marker

Comparison of timpograph of 7/7 with 7/14. 8th superior zone improved; atlas same; axis worse; 8th inferior zone same; 21st inferior zone worse.

1 improved — 2 same — 2 worse.

Summary: Same 6 — Better 13 — Worse 20.

Conclusions on Timpographs of Test Cases Pre and Post

Timpographs prove quantity flow of mental impulse supply, before and after adjustment.

Of pre and post timpographs taken in ten test cases, the following sums up what has taken place: 6 same, 13 better, 20 worse.

The above backs to three phases of subject matter under study:

1st. Process or method of analysis

2nd. Adjustments pursued in trying to improve case

3rd. Post proof as against pre record of each case

Post proof being spinographs

NCM-NCG-NTP graphs

timpographs.

No matter what the form of analysis or method of establishing proof, the crux of every corrective means used lies in the adjustment, per se. We believe too much was done, too many ways, at too many places, to try to secure better results. Better results, in our humble opinion, could have been secured in doing less, in less ways, in a less number of places. We believe there are more accurate and efficient methods of analysis; for, after all, the more complex, the more wrong it can be; the more simple, the more correct it should be.

Improvement noted in some timpographs can be accounted for; for anything done in the occipito-atlantal-axial area is bound to get SOME results. We have been more concerned in building absolute, constant, reliable, repeatable knowledge to do one simple thing, the right time, at the right place, in the right way, without camouflage, to eliminate guesswork.

Reports by Test Cases on Physical Changes

It would be interesting to take up one more point — how these cases have been feeling, generally; whether there has been any change for better or worse, under these Truscott test adjustment processes. It really is not a fair question to ask, because time is always the intermediate. It is not fair either to them or to us; but let's have the reports for what they may be worth.

Test Case No. 1 — Chas. Oyer

I seem to have a little more pep.

Test Case No. 2 — John Fisk

Seem to feel stronger, but I am more sore than I was before — muscular soreness throughout legs and back.

Test Case No. 3 — Don Pharaoh

Have felt more logy than previously. I had a headache yesterday which may be difficult to attribute to the adjustment. However, I rarely have headache. Dr. Chance adjusted me this morning, and I had a 3-pt. break — 3 pt. left on axis.

Test Case No. 4 — Ed Trebel

I felt rather logy before adjustment, and have felt peppy since. Have been having some headache.

Test Case No. 5 — George Vaughn

Worse, in every respect. Have had a dull headache, and have been sore in the lower back. Cannot get up when I am down.

Test Case No. 6 — Ethel Wood

Have not felt any different.

Test Case No. 7 — Miss London

Have had a slight headache, but feel about the same.

Test Case No. 8 — Wm. Heronemus

I have had a stiff neck ever since he malled me around the first time. It is difficult for me to turn my head. It may be partly my fault, because I did resist him when he started rotary. I was afraid of it. The second day I had a cracker-jack of a headache — which I had not had for two months. Since that headache, I have had a dull pressure in my head all the time, and when I lie down there is still a severe ache. My legs and back are sore.

Test Case No. 9 — Mrs. Miller

I have not felt so well. Have had headache, and my neck has never quit aching. My back aches, and I have felt weak at times, and feel as tho I am going to faint.

Test Case No. 10 — Evangeline Marker

No change.

Comments

Dr. Frisbie, in the CCA Journal (April, 1945) refers to the work done at Yale with an encephalograph, in measuring the potentials from "the volar surfaces of certain fingers * * * provided the circuit was completed." It goes without saying that potentials can be measured from EVERY finger of either hand; from every toe of either foot. In fact, we have been proving for years that nerve force energy flow can be measured in its equality flow from and to ALL PARTS of the human body.

However, to build up a complete record, we took timpographs of the fingers of both Drs. Truscott and Frisbie. A study of these

graphs shows there is a marked difference between graph wave patterns of each finger, of each hand; that Dr. Frisbie's are different from Dr. Truscott's. This would be true if we took 1,000 fingers on 200 hands; that there IS "a marked difference in each digital surface"; but to conclude that this indicates a varied polarity — negative and positive — "from finger to finger," is to suggest that currents in one finger are positive; in another, negative, etc. Difference in potential, as proven by graphs, is a difference between normality and abnormality.

IF there were NO subluxations, NO interferences, there would be as much normal function in tissue cell as there was manufactured for it in brain. IF there were NO interference, ALL PARTS of the body would be equal to each other, for they would attain functional norm. Because of subluxations, varying interferences, flows vary to different parts of body. Thus liver would be different in quantity expression than would spleen. This is equally true of one finger against another of same hand, or one hand against another of same person, or one arm against its opposite. This is not a question of one finger "positive" or another finger of same hand "negative"; it is, however, a difference between normal quantity and abnormal quantity flow thru various parts PRE-determined by THE SUBLUXATION.

To assume that this ABNORMAL or PATHOLOGICAL difference in quantity flow should be assumed "as a point of origin — that is, AS A BEGINNING" to a Truscott system, is to assume with equal value that any one bit of pathology in one part of body should be the beginning in a comparison with some other part of same body which was pathological.

Same logic can be carried thru to apparent lengths of legs or changes in sacro-iliac or sacrum positions. See our Volume XX for tests made on this subject.

We can hardly agree with the statement, "Actual progress in relation to purely spinal work in the Chiropractic field during the past two decades (20 years) has been meager." It has been VERY extensive — far more than is apparent by the subject matter of this report.

Dr. Frisbie, in his letter (May 20, 1944), claims:

"It follows the laws of neuricity utilizing a constant value WHICH CANNOT ERR."

Undoubtedly there are "laws of neuricity." If so, they can be measured and evaluated by scientific methods. Laws have a constant, and when applied always reach same definite and positive

conclusions. It is these we scientifically work with in establishing PROOF in our instrumentation. Dr. Truscott offers NO proof. On the reverse, if our instrumentation proof IS proof, there is much in error in Dr. Truscott's findings.

"It agrees with the spinographs IN EVERY CASE TO MY KNOWLEDGE."

What do ten test cases PROVE? His location and direction of adjustment did NOT agree with spinograph IN ANY case. If spinograph PROVES an atlas to be an ASR side-slip, then there is but ONE place to adjust, ONE direction to adjust it; it should be adjusted ONCE, beyond which there is nothing more one CAN do. What does the record reveal? Not less than two, on up to twelve "adjustments," from various directions from two sides, one of which must be opposite to spinograph, and using various methods.

"It agrees with the neurocalometer readings and surpasses that instrument in delicacy because the heat problem is OUT."

If the Chiropractic principle of pressure, resistance, and interference is sound, then HEAT is inevitable result and is IN. No amount of wishful thinking can wish it out. No finger tip of any human being is capable of detecting down to the extent of one degree equal to a clinical thermometer, much less any gradations below that which NCM establishes.

In building a fundamental for conduct of all research work in this Clinic, we established constants and eliminated variables. All spinographs are taken under a POSTURE CONSTANT so that pre-spinographs taken are scientifically comparable to post set taken of same case. Same applies to NCM graphs, pre and post. Therefore, conclusions reached regarding same are comparable under CONSTANTS.

Drs. Truscott and Frisbie are sincere men. They are honest in convictions. There is no question but what they think they have a world-beater. They graduated from The PSC — Dr. Truscott did — in meric system days. We in our Clinic have gone ahead in a tremendous amount of research work, and they have not kept up with developments. Consequently, in *their* endeavor — sincere and honest as they are — to get away from hit and miss of meric work, they tried to work out a system more specific, by confining it to SPECIFIC area. Instead of getting scientific work, such as spinograph, neurocalometer, timpograph, they have gone off deep end into mechanics and kinematics of spine, plus outworn psychological factors, and out of that has grown a guess-work of hitting around cervical region.

They are bound to have a percentage where they WILL get results. We think that percentage DID step up results in their

office practice to where it was better than meric, out of which grew the conclusion they had something better. But what they are getting in percentage is so much lower than is possible under a scientific, specific approach, that there is no comparison.

Drs. Truscott and Frisbie take the position that their method of using fingers in determining when there is or is not an interference — which fundamentally is proven extensively by our taut and tender fiber idea — is a more sensitive sense feeling method than neurocalometer. We have taken timpographs of their fingers, and they show a high degree of abnormality as compared with generation, showing that, if their theory is true, they work with an abnormality of nerve force flow potential.

Comments are apropos to Dr. Frisbie's letter of August 1, 1944.

In another section of this report, we have stated that Dr. Truscott was working FROM hit-and-miss, entire-spine, meric system idea, finally getting up to occipito-atlantal-axial area, and in so doing began to get better results. Dr. Frisbie says:

“* * * and since has carried on a STRICTLY meric system practice.”

Strengthening this position, Dr. Truscott “permitted various and sundry to ‘adjust’ up and down his spine” with BAD results. It was this observation that opened HIS eyes to necessity of a better approach; a conclusion WE reached HERE when WE went SPECIFIC 30 years ago.

Further strengthening this position, Dr. Frisbie states:

“Like so many Chiropractors, he never made the grade in HIO work, but also like many, his experience taught him that unless atlas-axis were adjusted NOBODY got well.”

We suggested, in another section, there are three stages of development which Dr. Truscott is going or should go thru, viz., meric system, Truscott system confined to atlas-axis area, AND SPECIFIC method used and taught by us here, on which he “never made the grade.” If he had, he would see that it is far better than anything he now uses. He needs more to attain objective HE NOW seeks.

Dr. Frisbie refers to “that most everyone had a functional short leg; that every sick person showed this phenomena; that every really well person never did.” This is not new. In our Vol. XX, printed in 1938, are many comparative colored graphs as well as a lengthy article discussing this fact with which we agree now and established as a fact then. Ninety-nine per cent of our Clinic research work reveals where there IS an atlas or axis side-slip,

head tilts to one side. This produces adaptative curves in spinal column, eventually tilting pelvis, making it appear that one leg is either longer or shorter than other. Our full-length spinographs and contourgrafometer records prove this beyond question. Basic technicians also noticed this. They "correct" this with a lift in heel, treating effects. The SPECIFIC and Truscott systems correct this by adjusting cause — the side-slip atlas or axis subluxation. This observation is not new.

Ever since we opened The B. J. Palmer Chiropractic Clinic (July, 1935), we have always taken a pre full-length spinograph upon entrance of case; also a post full-length spinograph upon case leaving Clinic. We developed and patented contourgrafometer for purpose of automatically and mechanically recording contours of human live spinal column.

Evidence of these two methods, broken into an analysis, has proven that average spinal column is lengthened from $1\frac{1}{2}$ to $1\frac{1}{2}$ inches in height, from 2 to 6 weeks, under specific method of analysis of occipito-atlantal-axial area in use in our Clinic.

Truscott system, as demonstrated here and as our records prove, does and will get better results than those of average Chiropractic practitioner in the field. This, for reason that average results in average mixer's office or average careless slip-shod Chiropractor, are SO low that it is a disgrace to Chiropractic. Drs. Truscott and Frisbie did not come here to test their method against that of average incompetent and inefficient field practitioner. They came to have us test THEIR method by the BJP CC scientific procedures. By THAT comparison, we made our tests and make our report.

In fairness to the Truscott system, Drs. Truscott and Frisbie, during tests and demonstrations conducted, we have studiously avoided talking or discussing with Drs. Truscott and Frisbie, at any time, in any way, during their stay here, outside of our first meeting before any tests were made or demonstrated. To have discussed subject matter during tests, could have easily been the means of presenting our views ahead of conclusions reached, or of prejudicing us for or against their work; or prejudicing them for or against our work under investigation.

Also, in fairness and justice to the Truscott system, Drs. Truscott and Frisbie, during all tests and demonstrations conducted, we studiously avoided talking or discussing with any of test cases, individually or in private, anything which was taking place, except in two group meetings held — one on Wednesday, July 11th, and another July 18th; and then only with entire group of ten cases

present in group meeting. No pressure or influence was exerted in any way upon them to express opinions other than what they willingly volunteered. Such group meetings were within our province to secure information as to data we desired upon which to base some of our findings. Outside of these two meetings, no further conversations have been held with any one or as a group.

There is nothing quite so fickle and transitory as memory. Ever since we opened The BJP Research Clinic, we build a very exhaustive and complete case file on every case. Our case files are more complete than any clinic of any kind. We have records as proofs upon which we break down analyses upon which we base conclusions. We followed this procedure in building Case Files on ten test cases used in this work. Every kind of evidence is a matter of record. This establishes a basic procedure for future reference. Conclusionary opinions based on memory covering years are unstable and unreliable. Conclusionary opinions based on evidence, proof, records which do not weave back and forth, but are stable, reliable, trustworthy.

All NCM graphs are taken under exacting scientific conditions, each being mechanically and automatically recorded, leaving nothing to judgment as to what eyes saw or to memory as to what was delivered; thus pre and post checks are exactly comparable. Spinographs are exposed under a precise posture constant, record being made of same and filed; thus future post sets are exactly duplicated as to same precise posture constant, eliminating doubt as to correctness of interpretation by comparison. Timpographs are taken under same exacting scientific conditions, eliminating variables, recording constants, records kept of each step of technique, all of which makes them comparable as to changes occurring between pre and post graph wave patterns. It is one thing to express positive opinions on negative products, and another to express positive opinions on positive work.

This report, therefore, is based upon case file records, based upon ten years of scientific research, break-down analyses of evidence which is proof not based on what we wish, hope, or think is a reality. That it now differs or disagrees, is perhaps because of difference in methods of *proving* the problem before us.

As applicable to demonstration before us, and its proof, we took full-length spinographs and then regrettably a short developed in our equipment and we were unable to get full-length spinographs of six cases. A break-down analysis of four cases, however, shows that three fit into picture which Dr. Frisbie herein states; which we have been proving for ten years on thousands of cases; therefore, what he herein suggests is not new.

When there IS a vertebral subluxation, or vertebral misalignment, there are taut and tender fibers. This, Dr. Truscott also observed. We observed it thirty-five years ago. We regarded it then purely as a diagnostic symptom. It is still such. Dr. Truscott meets this underlying fundamental with a light touch which he says produces a change in legs, which he says proves his analysis. ANY method which would produce relaxation such as applied heat, applied massage, etc., would accomplish same purpose. In so doing, no adjustment need be given. To correct THE cause, and PERMANENTLY restore transmission, it IS necessary to adjust THE cause at atlas or axis.

One positive value of science and its method of procedure is that it establishes a fact which is or is not, and no amount of sophistication breaks it into being inconsistent, thinking by so doing he better pleases those who disagree with him. For instance: note these statements in the above letter: " * * * it never failed him. * * * Under him, x-rays will ALWAYS be valuable."

He denies this later, when he says: "It DOES, or will in time antiquate the NCM * * *." It either does, or it does not. Which? If it does, then no apologies need be offered for its elimination. If it does not, then no excuses need exist for its necessity to accomplish objectives not attained any other way.

It is easy to grow over-enthusiastic and make statements beyond proof. Take this one:

"He found simple ways of obviating this and finally evolved a system which WILL DUPLICATE IN ONE MINUTE hours of X-ray research and neurocalograph readings. Based on natural laws, IT NEVER FAILED HIM."

To apply light finger touch or to apply heat or leg pressure methods, which relax tense and taut ligaments, to relax muscles, to produce corrective adaptative changes for temporary value, proves nothing in the long run. It was for this and these reasons we abandoned the taut and tender fiber idea, as applicable to meric system or specific method as of any value in ascertaining the location or position of subluxations.

Dr. Pharaoh, as one of the ten test cases, said:

"I tried to approach this with an open mind. I would say that he is working along the lines of a combination of systems which have been rampant in California for the past seven years: taut and tender fibers; spinal orthopedy; body mechanics; muscular imbalance; tension and relaxation of spinal muscles. To further confirm my belief that it involves mechanics—one of the first points of contact is on the condyles of the femur. As far as I can see, it is concentrated on, and perhaps a good development of the palpation sense. The palpation is very light, such as used on taut and tender fibers. Also, the presence of hot and cold boxes, muscular tonicity and spasticity, which goes back to basic

technique. A combination of all these methods, with the hope of reaching a conclusion. They adjusted my fifth cervical on the theory that it would hold the atlas and axis in place. They said my neck was very interesting—I had a 3-Y and a 4-Y. Why, I don't know. They think they have something, and they are trying to prove it—so more power to them."

Dr. Palmer: "You referred to taut and tender fibers. Is it necessary to have polarity of the fingers to use that idea?"

Dr. Pharaoh: "While I was on the Hylo, both of my arms were in contact with the metal under the table."

(It was stated here that Dr. Truscott placed a rubber band around the head of one case; and also around the arms of others.)

The "secret" or crux of that which is claimed to be new and original with Dr. Truscott is his approach to a new process of analysis. This consists in the conclusion that the fingers of the hand of the Chiropractor can be positive and negative polarities; that by a "spider-like" touch of fingers over atlas-axis area, he can utilize polarity and thus determine presence or absence of subluxation and whether there is or is not interference, or whether it is clear of all such at that time.

(See our letter of May 31st wherein we stated we wished to test "polarity" of fingers.)

(See first two paragraphs of article from CCA Journal: "* * * and varied in polarity from finger to finger.")

(See also Dr. Frisbie's letter of August 1st: "Metal, he found, reversed the results, making them unreliable. Even teeth fillings would do this—any metal at all on the body.")

Teeth fillings and bridge work would be, in many cases, impossible to be removed for purpose of a spinal analysis. It might also be difficult to remove from fingers rings that have been worn for years. Presumably, this accounts for rubber band under chin and over head—it breaks polarity between teeth and the body. Same might be said for rubber bands around arms—they break polarity from rings on fingers.

Polarity means to or from pole or poles, such as TO North Pole or FROM South Pole. In electricity, it means TO or FROM generator, and thus called "positive" (from) and "negative" (to). There is also a like counterpart in human body, viz., "efferent" current (flowing FROM brain where generated), and "afferent" (flowing TO brain where it is interpreted.)

Efferent current flow can be diminished by pressure-interference or pressure-resistance. This IS the subluxation fundamental upon which the Chiropractic principle rests. That this diminished amount can be measured is obvious—by measuring HEAT induced

by resistance; or by measuring quantity present with the timpograph.

Dr. Truscott contends his FINGERS can detect the "polarity" of difference because of subluxation present or absent. All work done by Drs. Truscott and Frisbie, in our institution, during these tests, was done in an open room, with its energies; no grounding or shielding of any kind existed or was used. Adjusting tables (two — one for breaks, other for rotary and recoil adjusting) were constructed of metal. Note comment by Dr. Pharaoh about his arms.

Any electrician can quickly justify that rubber bands, as described, would not obviate a possible polarity under conditions mentioned.

The taut and tender fiber idea is 39 years old. We here gave it birth to try to better locate THE place of what we called a subluxation under meric system interpretation. If taut and tender fiber idea were last word, we here would not have discarded it in favor of more accurate and more reliable methods of spinograph, neurocalometer, timpograph, etc. We discarded it when we arrived at SPECIFIC. We still use taut and tender fiber idea only in relation to timpograph work to accurately locate organic exits of nerves enroute from brain to organs, via spinal column.

All necessary to detect taut ligaments and tender nerve fibers are sensitive tips of three fingers of either hand, gliding lightly over area suspected. If it is there, you feel it. If it is not there, you don't. It is not necessary to wrap up this idea in presentation or demonstration with anything mysterious. There is a difference, however, between detecting taut and tender fibers as a location and direction indication of vertebral subluxation; AND, spino-graphic and NCM methods. Former is not positive or absolute; latter is.

It is possible to have a subluxation and not be sick. It is possible to have a subluxation and be well. Hypothesizing: at 12:00 noon, a man is well. At 12:01, he has an accident. It takes a second to produce a subluxation, with occlusion, pressure, interference, *beginning* a dis-ease, even tho no pathological disease exists. Hypothesizing further: it is possible to have a pathological disease, and at 12:00 noon give an adjustment that takes but a moment, correct vertebral subluxation, which now does *not* exist, even tho patient is still sick. Element of time differentiates between one and other.

Same is true of taut ligaments and tender nerve fibers. There can be a subluxation without taut and tender fibers. There can also be taut and tender fibers without a subluxation. Taut and tender fibers are pathology that grows and develops; and, like any

other pathology, it takes time to intervene. They can exist without subluxation, element of time differentiating difference. That is why taut and tender fiber is not soundest guide to determine when and when not subluxation or interference exists. This rule does not apply with CHRONIC subluxation or CHRONIC pressure-interference — only spinograph and NCM give positive and absolute evidence of their existence. Spinograph and NCM DO give that information as of time record is made. That is why we, years ago, forsook one method in favor of other. And it is for that same reason we do not now deny the method at work in the Truscott system, insofar as its practical elements apply. For same reason, we cannot now support it in its entirety as a better method now to use, because there IS a better, safer, and more reliable method at our command.

Desiring to rely upon the taut and tender fiber idea, with the soft, sensitive, "spider-like" touch, it could be used exclusively on occipito-atlantal-axial area. It is not necessary to refer to some distant part of our bodies. We could apply it exclusively, specifically. We could today do everything Dr. Truscott does at atlas-axis area, under taut and tender fiber principle and practice, and use it without any idea of "positive" or "negative" potentials of fingers, rubber bands, or referring to key nerve centers or distant osseous land marks in some distant location. We found it WAS NOT sufficiently reliable, trustworthy, or accurate, as a causative factor or in correcting interference to transmission. Basic technique used this key-nerve center osseous landmarks idea of the buttocks, contending they relax muscles, relieve pain, etc., by a very light pressure at a certain spot.

It is obvious from this report that in almost every case Dr. Truscott adjusted left or right, one way or other, on a rotary, a break, or recoil. By what means of deduction does he reach conclusion that he ought to OPEN with a left and FOLLOW with a right, or vice versa? If the Truscott system of analysis is sound, is 100 per cent perfect, and is better than other means, why should there be any doubt as to a SPECIFIC correction, and stopping? On the reverse, record shows in every case he adjusted or attempted to adjust no less than two, four, five, up to twelve times — showing the indecision or inability to reach a SPECIFIC conclusion on what he seeks. He contends his system is perfect. Why guess and fish around? Is that sound or unsound?

IF approach (analysis) is correct, then conclusion (subluxation) is wrong; otherwise, why fish around, experimenting? If conclusion (subluxation) is right, viz., experimenting to find right one, right

way, then approach is wrong. It is not for us to say which, but we have a strong suspicion neither is all it should be. At least, they are not what we have and use in THIS clinic.

If there is an atlas ASR or axis PL, and Dr. Truscott dismissed a test case after having adjusted to right in first instance, or to left in other, then he has made case worse — if Chiropractic principle as we understand here is sound.

Each case is a rule unto itself. There are constants and variables of spinal columns, vertebral subluxations, etc. The great endeavor is to decipher constants and apply them; eliminate variables and deny their use. Each case HAS a specific method of approach which DOES eliminate variables. The Truscott system has too many variables to make it even interesting to us in our work.

Question frequently arises how far we are justified in determining cause from effects. Chiropractic has always worked FROM cause TO effects. To predetermine subluxation by an effect, is to be and do exactly what a physician does as he would do it. To judge by trochanters of femora, or by tilted pelvis as basic technicians do, is to work from effect to cause.

We rarely, or almost never, adjust any case under a two-point NCM break reading. We arbitrarily established this figure to avoid over-adjusting, believing over-adjusting is a greater evil in our ranks than under-adjusting. In some of the NCM records of our ten test cases, it shows a no-break, or not a two-point break reading. We would not have adjusted such cases. Dr. Truscott adjusted all ten, notwithstanding. Of course he did not have the information WE had. He relied upon his method of determination.

After all, whether he has or has not "checked out" a pressure is purely his opinion, his idea, his conclusion of mind. He has no other proof to offer. He says he has. We may say he has not. We offer proof. He offers an opinion. He says we should not use our proof as criterion because it is prejudging his method.

Granting (for sake of argument) that fingers are more sensitive than NCM, timpograph measures down to five-millionths of a volt or less. We took post-timpographs when he got thru, which will answer question as to whether or not what he has done, in the way he did it, has increased or decreased interference.

There are two ways of reaching conclusions: 1. "I think." "My opinion is." "My judgment is." And he can be right or wrong. 2. Build up data from records that are incontrovertible.

Under our work in The B. J. Palmer Chiropractic Clinic, covering a period of 15 years, we have confined ALL adjusting to atlas

and/or axis vertebra. Once in 15 years, we adjusted ONE third cervical. Dr. Truscott went to a sixth cervical area in one case. Under our work here, covering a period of ten years, on thousands of cases, we confined our adjusting to the recoil method only. Dr. Truscott used break, rotary, and recoil. In one case he adjusted from anterior of neck.

We here have long realized danger of over-adjusting. Over-adjusting can be of various kinds: too many adjustments at too many places; too many adjustments at one place; too many adjustments given in wrong direction, etc. We here have found that less we do, IF DONE RIGHT, the better are quicker results on worse cases. We also found that more we do, IF DONE WRONG, worse are run-down conditions of cases.

If Chiropractic principle is sound — that *A* vertebral subluxation is the cause of dis-ease, and it needs adjustment to correct ITS position — then ONCE it IS corrected nothing more can be or should be done. To keep hammering and pounding away is to defeat the objective. However, whether more or less IS done, depends upon whether your approach is correct or incorrect. If correct, Dr. Truscott will find THE subluxation and give it AN adjustment — and stop. If approach is incorrect, he will not find THE subluxation, and he will need try and try, again and again, to do something, hoping eventually he may get it right and help the case. It appears here that is exactly what HAS been done in these ten test cases.

Dr. Frisbie suggests that vertebral subluxation has several angles of direction of subluxation, which require several angles of direction of adjustment — one “adjustment” for EACH direction. This occasions the NECESSITY for SO MANY “adjustments” at atlas, or axis; from right and/or left, etc.

Dr. Frisbie states he knows only ONE man who can take out all angles with ONE adjustment. If B. J. can and does do it, it proves he is working WITH A SYSTEM THAT WORKS WHEN IT IS WORKED. We are here, now, placing on trial a Truscott system — not Dr. Truscott. We are not interested in what individuals can or cannot do. It is a PRINCIPLE AND PRACTICE under scrutiny.

For 15 years, our break-down analysis shows we have adjusted ONE vertebra, ONE place, ONE way, ONCE, on an over-all gross average of 28.6 days. What does Dr. Truscott's record show, by comparison, over 5 days? To do characteristic work we do here, requires KNOWLEDGE based on facts, proof, data. We here get worst cases, and results we attain speak for themselves.

Dr. Frisbie has suggested we here should not pre-judge their

system by opinions previously made. All today is a check based on yesterday, backed by its judgments reached by best means at its commands. They express their opinions as to the merit of their work of today as against the lesser value of their work of yesterday. We do the same. We check our judgment of their work of today on our fifty-five years of experience.

We have learned, down thru the years, never to form an opinion until we get all facts. Facts reach conclusions, automatically.

Drs. Truscott and Frisbie came with the understanding we would test their system with our clinical equipment upon which we rely, viz., spinograph, NCM, timpograph, etc. This we have done — both pre and post checks.

An analysis of the frequency of adjustments given on these ten test cases, plus variances and variables from left to right and right to left; and variables from atlas to axis, and axis to atlas, to lower cervical, shows working under the INCLUSIVE process; and no sound conclusion CAN BE reached as to what adjustment from which direction released interference and restored transmission. Under the INCLUSIVE process, including more than one adjustment — at more than one place — in more than one direction — which happened in every case — we cannot determine WHICH vertebra WAS subluxated; WHICH subluxation CAUSED interference; WHICH adjustment RELEASED that interference and permitted restoration of transmission.

It is obvious there is nothing specific, definite, exact, about this work. It shows a left subluxation of axis could be twisted into place by rotary of atlas from right; and atlas gets credit. Or, we might have atlas left, and axis from left might pull atlas around and correct it; yet atlas was one subluxated, causing interference, and axis gets credit.

There is nothing definite or conclusive about Truscott work demonstrated.

Contrast this experimenting, fishing for subluxation, letting your fingers or mind tell you when objective has been attained, with our method here. Spinograph ascertains one vertebra and its position. NCM tells when and where THE pressure-interference is and is not. Even tho Dr. Truscott contends it is a "gross" method of ascertaining proof, it is more reliable than are fingers; more positive than are rubber bands; and heat in a sensitive thermometer is more reliable than possible feel of fingers. And, even tho he contends NCM is a "gross" method, he can hardly make same contention as regards timpograph and its conclusions based on very minute

graphs. At least, what NCM reveals, it automatically, mechanically, and truthfully records its graphs, which takes it out of the mental and theoretical field.

Regardless, by comparison and contrast, everything WE depend upon is a scientific instrument that records its findings, which we could not change to experiment with, to make fit our mental attitudes. Everything HE depends upon is a question of the individual and his mental values which can be changed to fit caprices of person doing the work.

Report as Prepared and Presented By Dr. Frisbie
TRUSCOTT SYSTEM OF ANGULAR ANALYSIS
AND CONTROLLED ADJUSTING

B. J. Palmer Clinic, Davenport.

Test Case No. 1. Mr. Chas. H. Oyer

PSC Student

Age 28.

Subjective symptoms upon entry:

Headaches averaging once each week to ten days.

Definite abnormal lassitude and tiredness noticeable for several months or more.

7/ 5/45 Listing — Palmer ASRA- (P)RI
Listing — Truscott Mass anterior atlas, right lateral, Rotation right anterior, axis right transverse anterior.

Adjustment at 2:30 p.m.

Condyle adjusted to clear rotation of atlas; side posture Right lateral (recoil) axis sitting rotary.

7/ 6/45 Listing — Palmer Same.
Listing — Truscott Atlas right rotation, axis RTA
No laterality of atlas

Adjustment at 11:45 a.m.

Condyle to clear rotation of atlas; sitting rotary.

7/ 7/45 No nerve pressure present

7/ 9/45 No nerve pressure present

7/10/45 No nerve pressure present

7/11/45 No nerve pressure present
Dismissed for clinic re-check

7/16/45 Recalled and rechecked to ascertain stay-put qualities.
No pressure present

Clinical Observations

- 7/ 6/45 Frontal headache after first adjustment
7/ 7/45 Frontal headache absent, noticeable feeling of improvement as to "pep" stated by patient.
7/ 9/45 Soreness reported in cervical area, further improvement reported.
7/16/45 Reports no complaints, increased vitality and continued feeling of increased vitality.

Test Case No. 2. Mr. John C. Fisk
PSC Student
Age 37

Subjective symptoms on entry:

Chronic sacro-iliac strain at times incapacitating over period of at least 5 years.

- 7/ 5/45 Listing — Palmer ASRA-(P)RI
Listing — Truscott Mass anterior atlas, right lateral atlas.
Rotation right anterior, axis right transverse anterior.

Adjustment at 2:00 p.m. Same as in test case No. 1.

- 7/ 6/45 Listing — Palmer Same
Listing — Truscott Atlas in right rotation, axis RTA
No laterality of atlas

Adjustment at 11:30 a.m. Condyle to clear rotation of atlas; sitting rotary on axis.

- 7/ 7/45 No nerve pressure present
7/ 9/45 Pressure present — atlas in right rotation; axis RTA
Adjustment as on 7/7/45
7/10/45 No pressure present
7/11/45 No pressure present
7/12/45 No pressure present
Dismissed for clinic recheck but in doubt as to stay-put and further appointment necessary.
7/13/45 No nerve pressure present
7/16/45 Pressure present — rotation of atlas right, axis RTA
Adjustment given as on 7/9/45
7/18/45 No pressure present.

Clinical Observations

- 7/ 6/45 Some soreness in pectoral and shoulder region
- 7/ 7/45 Less soreness; complains of insomnia
- 7/ 9/45 Slight vertigo noticed; some twitching in legs
- 7/10/45 Back feels stronger, less soreness of musculature
- 7/11/45 Reports marked improvement
- 7/12/45 Reports still improved
- 7/18/45 States back is stronger but still some soreness present.

Test Case No. 3. Dr. Donald Pharaoh

Instructor PSC

Age 30.

Subjective symptoms upon entry:

Laryngeal inflammation amounting to huskiness; history of possible spastic colitis.

7/ 7/45 Listing — Palmer ASRA-PRI

Listing — Truscott Mass anterior atlas; right lateral atlas; right rotation atlas; right rotation axis; axis en masse posterior; 5th cervical pressure from above demonstrated as apex of active lordosis of cervical spine affecting stay-put of musculature of atlas-axis.

Adjustment at 1:00 p.m. Condyle; right lateral; sitting axis rotary as in Cases 1 and 2. Also replacement of axis from posterior and adjustment on anterior transverses of middle cervicals to reduce lordosis.

- 7/ 9/45 No nerve pressure present
- 7/10/45 No nerve pressure present
- 7/11/45 No nerve pressure present
- 7/12/45 No nerve pressure present. Discharged for clinic re-check.

Clinical Observations

- 7/ 9/45 Moderate headache and moderate sacro-iliac distress
- 7/10/45 Both observations of 7/9 absent; no complaints
- 7/11/45 Slight "foggy" throat; no other complaints
- 7/12/45 Throat better; no complaints.

Test Case No. 4. Mr. Edwin H. Trebel, Jr.
PSC Student
Age 24.

Subjective symptoms upon entry:

Chronic mastitis; alleged hypothyroidism;

Tenderness over gall bladder area.

Mastitis preceded by trauma.

7/ 6/45 Listing — Palmer ASRA- (P)RI

Listing — Truscott Mass anterior; right lateral; right rotation; axis right transverse anterior.

Adjustment at 3:10 p.m. Condyle; right lateral; sitting rotary as in Cases 1, 2, and 3.

7/ 7/45 Listing — Palmer Same

Listing — Truscott Less pressure than 7/6/45; pressure on atlas in right rotation; axis RTA

Adjustment given. Condyle; sitting rotary.

7/ 9/45 Listing — Palmer Same

Listing — Truscott Small pressure on atlas in right rotation; axis RTA

Adjustment given as on 7/7/45.

7/10/45 No nerve pressure present

7/11/45 No nerve pressure present

7/12/45 No nerve pressure present. Sent to clinic recheck.

7/13/45 No nerve pressure present

7/14/45 No nerve pressure present

Clinical Observations

7/ 7/45 Slight frontal headache in evening, following adjustment.

7/ 9/45 Reports no headache on 7/8. Slight on 7/9.

7/10/45 Reports better in general feeling of strength, breast about same.

7/12/45 Feels perfectly well except for breast.

7/14/45 No complaint except breast.

Test Case No. 5. Mr. George A. Vaughn
PSC Student
Age 51.

Subjective symptoms upon entry:

Sacro-iliac distress of many years standing;
chronic sinusitis; has been operated several times;
some chronic gastralgia.

7/ 7/45 Listing — Palmer ASRA-PRI

Listing — Truscott Mass anterior atlas, right lateral
atlas; right rotation atlas; right
rotation axis and axis as a mass
posterior.

Adjustment at 1:15 p.m. Condyle; right lateral; sitting
rotary to axis; replacement of posteriority of axis from
posterior.

7/ 9/45 Pressure still present. Adjustment for right rotation atlas;
right rotation axis.

7/10/45 No nerve pressure present

7/11/45 Pressure returned; adjustment to atlas right rotation, axis
right rotation.

7/12/45 No nerve pressure present

7/13/45 No nerve pressure present

7/16/45 No nerve pressure present

7/17/45 No nerve pressure present.

Clinical Observations

7/ 9/45 Slight headache and slight sore back

7/11/45 No improvement noted

7/12/45 "I don't feel a hell of a lot better"

7/13/45 About the same

7/14/45 Feel fair, back not so sore as day previous

7/16/45 Sinus and sacrum bother

7/17/45 "Not too good" reports.

Test Case No. 6. Miss Ethel Wood
PSC Student
Age 22.

Subjective symptoms upon entry:

Laryngeal soreness; pharyngitis; subject to coryza;
possible abdominal adhesions; sacro-iliac distress chronic.

- 7/ 7/45 Listing — Palmer ASRA- (P) RI
 Listing — Truscott Mass anterior atlas; right lateral
 atlas; right rotation atlas; right
 rotation axis.
 Adjustment at 1:30 p.m. Condyle; right lateral; rotary.
- 7/ 9/45 No nerve pressure present
 7/10/45 No nerve pressure present
 7/11/45 No nerve pressure present
 7/12/45 Pressure. Right rotation atlas; right rotation axis. Adjust-
 ment given.
 7/13/45 No nerve pressure present
 7/14/45 No nerve pressure present
 7/16/45 No nerve pressure present. Sent to clinic recheck.
 7/17/45 No nerve pressure present.

Clinical Observations

- 7/ 9/45 General feeling of "no good" until 9:00 p.m. 7/7
 7/10/45 Sore throat reported
 7/11/45 Throat better
 7/12/45 Headache since afternoon of 7/11
 7/13/45 Head Clear; no complaint
 7/14/45 Feels "o.k."
 7/17/45 Feels "o.k."

Test Case No. 7. Mrs. June Landon
 PSC Student
 Age not given.

Subjective symptoms upon entry:

Some headaches, especially at functional period;
 admits distress in gall bladder.

- 7/ 9/45 Listing — Palmer ASRA- (P)RI
 Listing — Truscott Atlas in right rotation; axis RTA.
 Adjustment at 3:20. Correction of above, after which
 pressure appeared as right laterality of atlas; same
 corrected.
- 7/10/45 No nerve pressure present
 7/11/45 No nerve pressure present

- 7/12/45 No nerve pressure present
 7/13/45 No nerve pressure present. Sent to clinic recheck.
 7/14/45 No nerve pressure present.

Clinical Observations

- 7/10/45 A little headache and slight neck soreness, probably due to incomplete relaxation on adjustment on 7/9/45.
 7/11/45 Slight nausea in forenoon; feeling fine in afternoon.
 7/12/45 Feels all right.
 7/14/45 No complaint.

Test Case No. 8. Mr. Wm. S. Heronemus
 PSC Student
 Age 51.

Subjective symptoms upon entry:

Chronic headaches; chronic sinusitis; some occasional lower bowel pain; some chronic soreness at sacro-iliac articulation.

Note: This patient was alleged to be injured by his first Chiropractic adjustment some years ago; since that time has experienced difficulty in relaxation to permit further adjustments.

- 7/10/45 Listing — Palmer ASRA- (P) RI
 Listing — Truscott Mass anterior atlas, right laterality; right rotation atlas; right rotation axis.

Adjustment at 3:10 p.m. Condyle; right lateral; rotary.

- 7/11/45 Pressure present; rotation both atlas and axis. Adjustment on condyle for atlas rotation; axis rotary.
 7/12/45 No nerve pressure present
 7/13/45 No nerve pressure present
 7/14/45 No nerve pressure present. Sent for clinic recheck.
 7/16/45 No nerve pressure present
 7/17/45 No nerve pressure present.

Clinical Observations

- 7/11/45 States nose is clear, breathes freely; pain in right occipital region (due to lack of relaxation on adjustment).
 7/14/45 Some headache on 7/12 cleared this date. States stomach does not now bother, but had previously.

7/16/45 Feels fair today.

7/17/45 Right leg better, no headache, says symptoms some better.

Test Case No. 9. Dr. Velma Miller

Clinic Interne

Age 35.

Subjective symptoms upon entry:

Chronic syncope. No other complaint. Information as to fainting periodically originated from clinic staff. Case volunteered for testing.

7/ 9/45 Listing — Palmer ASRA- (P) RI

Listing — Truscott Right laterality only

Adjustment at 4:10 p.m. after which further analysis revealed rotation right on both atlas and axis.

Adjustments for correction of same administered.

7/10/45 No nerve pressure present

7/11/45 No nerve pressure present

7/13/45 No nerve pressure present

7/12/45 No nerve pressure present

7/14/45 Broke her appointment

7/16/45 No nerve pressure present. Sent to clinic recheck.

7/17/45 No nerve pressure present.

Clinical Observations

7/10/45 Says sore throat, neck aches, rash on hands and arms, eyes appear to be "bleary."

7/11/45 Eyes still blur, throat still sore. Says had fainting spell for FIRST TIME. (Subsequent information shows to be chronic.)

7/12/45 Information from case being proved unreliable, no further information was solicited.

7/13/45 Patient appears in good spirits. No questions asked.

7/16/45 Appears to be feeling fine. No questions asked.

7/17/45 No questions asked.

Test Case No. 10. Mrs. Evangeline Marker

PSC Student

Age 38.

Subjective symptoms upon entry:

Occasional headache, neuralgia left arm subacute, possible gastric deficiency. Appears in fair health.

7/ 9/45 Listing — Palmer ASRA- (P)RI
Listing — Truscott Mass anterior atlas, right laterality
rotation right on atlas, rotation
right on axis.

Adjustment at 3:45 p.m. Correction of above in usual manner.

7/10/45 No nerve pressure present
7/11/45 No nerve pressure present
7/12/45 No nerve pressure present
7/13/45 No nerve pressure present
7/14/45 No nerve pressure present. Sent to clinic recheck.

Clinical Observations

7/11/45 No complaint
7/12/45 No complaint
7/13/45 No complaint
7/14/45 No complaint — feeling fine

Report By Drs. Sherman and Pharaoh

(After taking the Truscott System course July 21, 22, 23.)

Dr. Palmer: What do you think of the Truscott system?

Dr. Sherman: I could not possibly answer that, as regards just what it is going to lead to. However, some of the things they claim do actually work out. Whether or not it has any analysis value, I do not know; but I do know that some of the physiological reactions which they say take place, do take place.

Dr. Truscott told the story about how he noticed that the legs do change in length. He said that he happened to be sitting with his hands on his knees, and with his thumbs at a certain point they were uneven. That was the beginning of his research on it. Then he spent a few years trying to work out a workable technique whereby his findings could be interpreted as to when the adjustment was to be given, when the pressure exists. It does work out, to a certain degree. Of course, I am not any expert at it, but we checked different individuals and it does react that way.

Yesterday, Dr. Truscott told Carl Remlin to go ahead and work on a case with Basic Technic. Then he checked

up afterward and told him why it did not work. In his own mind, Dr. Truscott is thoroly convinced that the adjustment has to be on the upper cervicals. Remlin used Basic Technic, and Truscott told him he took the wrong contact. Truscott was telling Remlin how to adjust with Basic Technic.

Dr. Palmer: There is nothing new in that. The graphs in my Volume XX are based on that same principle.

Dr. Sherman: In asking him questions, Dr. Truscott always held out, "I don't know." He can't explain any of these reactions. He said they just work consistently, and they do, but he cannot explain it.

He holds that the pelvis is possibly constantly in motion, and that if there is not any subluxation existing in upper cervical region, there is no abnormality; but if there is a subluxation, then he says the lighter the pressure the better, to produce an imbalance. The first thing he takes into consideration is the anteriority of atlas, altho no adjustment is given to correct that. He just uses that as an explanation of the atlas going anterior. He finds that if he takes two fingers that are positive in their reaction, and holds them over the posterior arch of atlas, from three to five seconds, he will find an imbalance. Then he removes those fingers directly up, and goes back down, and the legs will be even. Then for laterality of atlas he will go over on the side of the transverse and hold a light contact for three to five seconds.

Dr. Palmer: How does he use that to determine which way the subluxation is?

Dr. Sherman: Just the way he has worked it out himself. He adjusted me the first day — no laterality. Yesterday I was the only one that remained clear.

Dr. Hender: Did he adjust in accordance with your old major?

Dr. Sherman: He changed it very little.

Of the two boys I had been adjusting, there was no change; and in my case there was very little change.

Dr. Hender: What is the thing that interests him so much in one leg being longer than the other?

Dr. Sherman: The idea is that when a subluxation does exist, these contacts on tubercles of femora do produce an imbalance of the legs.

Dr. Palmer: Haven't we for years been advocating the thot that if there is a side-slip atlas, then by tilting the head, all of which is muscular contraction — we have taken the position that when we do this the pelvis is tilted; then by adjusting we correct that? That

is what all the records in Volume XX were designed to prove. I don't see where he is advocating anything new.

Dr. Hender: How is it that by correcting the length of the legs, they can prove that pressure is out?

Dr. Sherman: That, of course, is what will have to be cleared up.

Dr. Pharaoh: There are more accurate ways of doing this than what Dr. Truscott is doing. I think Dr. Truscott has picked up a series of superficial reflexes. He stresses the importance of the rubber band, and the absence of any kind of metal.

Dr. Sherman: He said that possibly on a lot of cases it would make little difference. When considerable nerve pressure exists, you would not have to take these precautions.

Dr. Pharaoh: As far as the system goes, I think probably Dr. Sherman and myself can work out a more accurate check on the leg. One thing that surprised me is that Dr. Truscott, in his opening remarks, stated that he had never used the NCM. Dr. Frisbie is not a scientist — he is a promoter, and a good one.

Dr. Sherman: They tried adjusting a 6th dorsal, and found that temporarily it did begin to level the legs — that was on Mel. He asked him to get up and walk around, and they pulled right back again. They have never tried waiting and seeing what would happen over a period of time.

Dr. Palmer: I think Truscott is allowing Frisbie to push him into presenting this to the profession before he is ready to present it. There are too many things he ought to know.

Dr. Sherman: I am wondering if the electrical force has much to do with it, because even on himself he can produce those same changes. Yet he thinks it is the flow of electric phenomena. He said if you put a rubber band around the forehead, you can't get any of this.

Dr. Palmer: What do you mean by "electrical force"? There are only two kinds of forces — external and internal.

Dr. Hender: When they gave you this condyle adjustment, were you under the impression that it was quite a heroic move?

Dr. Sherman: Truscott tried and could not give it to me. Frisbie did. It was quite a jolt.

They will do good. Dr. Truscott claims it takes about seven adjustments before it holds.

Dr. Pharaoh: Dr. Frisbie said they go into the California set-up hoping to bring mixers to the cervical region of the spine. That, according to Frisbie, is their particular endeavor. They make the

statement that they are interested primarily as a means of analysis, and they say that the adjusting system has much to be desired.

Dr. Sherman: Dr. Truscott feels certain he has something of value, but he is not the one to work it out, and he was in the hopes that Dr. Palmer would think enough of it to take it and research on it.

Dr. Palmer: Did he make any comment regarding our report?

Dr. Sherman: He felt somewhat disappointed; but was pleased that the faculty members were permitted to go down and see what they had.

Truscott System

(A Report Submitted by Don Pharaoh, D.C., Faculty Instructor at PSC, and a Member of Truscott's Davenport Class, July 21st to 23rd, 1945.)

A system of Chiropractic designed to supercede the use of X-ray and Neurocalometer in analysis of patients. The claim is made that the average Chiropractor is unable to accurately arrive at a correct analysis and make proper adjustment or adjustments in majority of his cases, and it is claimed that when properly followed the Truscott system will do away with this element of error attributed to incompetency of the Chiropractor.

As yet, there is no definite philosophy or explanation of the "Truscott Phenomena", but possibility of an as yet undiscovered physical force being the motivating force was stressed.

It is claimed that the system seems to follow a natural law, and when properly followed will give uniform, regular reactions which eliminate the human variables in X-ray and Neurocalometer interpretations.

Gist of opening remarks made by Dr. Truscott at this class as a part of above report:

Procedure

1. *The Table:*

The table must be insulated from the floor upon which it rests, by *rubber*. No part of the table should touch the floor unless properly insulated. The patient's arms touching the metal of table has no bearing, because the entire unit is insulated.

The table should be so placed that it has the head-piece toward the *west*. Although this is a minor factor, it seems that best results are obtained when the head is directed westward.

The statement was made that the reactions seem to be much

stronger in a patient who is being examined *out of doors*, especially on a clear, sunny day, with the table directed to the west.

2. *The Doctor:*

The doctor must be devoid of all metals as far as the elbows — no rings, watches, etc. — and the arms should be bared to the elbows.

The finger-tips of the Chiropractor are said to have the following polarity: thumb, 3rd, and 5th fingers are positive; 2nd and 4th are negative.

3. *The Patient:*

The patient also must be devoid of all metals on the surface of the body. He should be instructed to remove all rings, watches, and other metallic objects (in the case of a sentimental bride who dislikes removing her wedding ring, it may be blocked out by applying a rubber band around the finger.)

To remove the effects of dental fillings, this interference is removed by applying a rubber band under the chin and over the cranial vertex as close to the ramus of the jaw as feasible. This procedure is said to remove all interference anterior to it; thus the tooth fillings are nullified.

If hairpins are left in place, they are blocked out by applying the second rubber band beneath the hair from occiput to forehead.

The examination gown should be of *cotton* because if silk or rayon is in contact with the skin it will impede the passage of energy from head downwards. However, if silk or rayon panties are worn, or other garments with an elastic band around the waist, their impeding action can be broken by slipping them down over the cheeks of the buttocks, thus breaking the continuity where the garment arches over the inter-gluteal fold.

Patient's hands must not touch the floor.

No other person than the Chiropractor should touch the patient during analysis, although it is assumed that if the third person were properly grounded by standing on a rubber mat, he would have no influence upon the accuracy of the test.

Note: (The unknown force evidently enters the body at the head and is transmitted by the skin to all parts of the body. Possibly in the presence of a vertebral subluxation it enters the deep nervous system thus producing a definite contraction of one part of the human body.)

Note: (All tests are made with the Chiropractic Index Finger. Evidently the force of energy travelling over the Chiropractor's

body is best transmitted by a very light contact — cob-web contact — with the tips of the fingers.)

Truscott System of Angular Analysis
(Truscott Check)

TECHNIC.

Pre-check — to determine the presence or absence of a vertebral subluxation with accompanying nerve pressure.

Atlas — can assume laterality and rotation and en masse position.

Axis — can only rotate or go posterior. T.C. shows 37 per cent go posterior in combination with rotation, and the remaining 67 per cent are only rotated.

The Truscott check has shown that 95 per cent of the cases have both atlas and axis involved at same time.

1. Check on abductor tubercles.
 - a. Stand up close to table.
 - b. Directly face head of table as much as possible.
 - c. Make thumbs nearly touch table before tightening up thumbs.
 - d. When hands are in situ before tightening up, wrists should nearly touch, and second digits of each hand should be 90 degrees to midline of case. When this is done, the internal borders of thumbs will be the surfaces to contact superior borders of abductor tubercles.
 - e. Tighten up the thumbs only.
 - f. Go in once only on each measurement.
 - g. Keep thumbs perpendicular — don't bend at joints.
2. Check on atlas listings.
 - a. 1X — a bilateral contact taken just below occiput, about one inch out from median line. Hold contact from three to five seconds and check tubercles. If there is an imbalance of one leg the atlas has gone anterior en masse on side of short leg. Note: Anterior en masse is the same as HIO listing — Superior.
 - b. 2X — a bilateral contact taken on occipital ridge about one inch out from median line. This will produce a balance of tubercles if atlas is anterior en masse. However, if one leg is short after use of 2X, it indicates that atlas is posterior en masse.

Note: Posterior en masse is the same as HIO listing — Inferior.
 - c. 3X — a unilateral contact made on transverse of atlas directly below mastoid. Take left side first. Hold three to five seconds.

If one of legs is shortened, this signifies a RIGHT ATLAS.

- d. 4X — a unilateral contact made on right atlas transverse. If one leg is shortened this signifies that there is a LEFT ATLAS.

If no imbalance follows the check on left transverse or 3X, the 4X should produce a reaction and vice versa if a subluxation is present. A balance on 4X after 3X.

- e. 5X — a unilateral contact one inch out laterally on arch of atlas. If one leg is shortened after contact on right side of arch, it signifies ATLAS IS ROTATED ANTERIOR ON RIGHT.

- f. 6X — a unilateral contact on left side of posterior arch. If 5X was positive, then there will be a balance of legs following 6X. If 5X was negative and 6X was positive, it indicates ATLAS ROTATED ANTERIOR ON LEFT.

If no imbalance follows the use of 5X or 6X then ATLAS IS NOT ROTATED.

*In 87 per cent of cases if there is no rotation of atlas there will be no rotation of axis.

3. Check on axis listings.

- a. 1Y — a unilateral contact made over transverse of axis on right side. If one leg is shortened following this, axis is ANTERIOR ON RIGHT SIDE (RIGHT ROTATION).

- b. 2Y — a unilateral contact made over left transverse of axis. If one leg is shortened following this, it shows that axis is ANTERIOR ON LEFT SIDE (LEFT ROTATION).
If a balance is found after each step, axis is not rotated.

- c. 3Y — a bilateral contact made over third cervical. If one leg is shortened following this 3Y, then axis is RELATIVELY POSTERIOR TO THIRD CERVICAL.

4. The Adjustments.

- a. Typical adjustment — ASLa or ASRa — Anterior en masse
Rotated
Laterality present
LTA or RTA of axis (rotation only)

Adjust 1st — atlas rotation (condyle)

2nd — axis rotation (sitting rotary)

3rd — atlas laterality (side posture)

- b. Same as above, only with addition that axis is POSTERIOR.
Adjust for posteriority of axis only after #3 above.

- c. Typical adjustment — AILa or AIRa — posterior en masse
rotated
laterality present
LTA or RTA of axis (rotation only)

Adjust 1st — atlas rotation (condyle)
2nd — axis rotation (sitting rotary)

- d. Typical adjustment — when rotation of atlas and axis is in opposite directions

Adjust 1st — axis rotation
2nd — atlas rotation
3rd — atlas laterality
4th — axis posteriority

- * Be sure to adjust atlas rotations with patient on back in anterior en masse listing.

Be sure to adjust atlas rotations from posterior when atlas is posterior en masse.

One Hundred Cases Analyzed by Truscott System

Atlas: en masse anterior 88 per cent
en masse posterior 12 per cent
right laterality 88 per cent
left laterality 9 per cent
no laterality 3 per cent
right anterior rotation 87 per cent
left anterior rotation 5 per cent
no rotation 8 per cent

Axis: Mass position posterior 37 per cent
Anterior rotation 89 per cent

Vertebral Involvement: Atlas only 2 per cent
Axis only 2 per cent
Atlas and axis combined 96 per cent

July 26, 1945.

Dr. Sherman:

Dr. Pharaoh:

Here are four interesting experiments:

Experiment 1. Patient prone. Head East-West.

Wearing ordinary jewelry.

Test trochanters, as usual. DO NOT touch neck.

Wait a few moments; test legs again, as usual.

Repeat this four or five times, or as many times as you would ordinarily do if you analyzed neck.

It will be interesting to see what happens to legs, by leg work alone.

Experiment 2. Same as above, except patient North-South.

Experiment 3. Place a measuring device on both knees, with projecting inner guide points.

IF legs ARE short, then one should be above other.

IF legs ARE lengthened, then they should move, one to the other.

Experiment 4. Bare the feet. Have a foot plate against feet, each separate.

If one leg is shorter, then they will be differently spaced.

If legs ARE lengthened, then one should be pushed by the foot to equal the other.

B. J.

July 27, 1945.

Dr. Sherman:

Dr. Pharaoh:

If our working principle is sound — that an atlas side-slip tilts the head — this necessitates adaptative curves in spine below to maintain equilibrium, which in turn tilts pelvis, up one side, down other, which makes one leg appear shorter, other longer.

With all this true, muscles on long side of each adaptative curve are contracted; muscles on short side of each adaptative curve are prolapsed.

The ONLY way legs can be made to be of normal length would be for muscles on contracted side to relax; or muscles on prolapsed side to contract.

IF Truscott "phenomena" be true, then let us suggest following two additional experiments:

Experiment 5. Have case STAND ERECT, facing West, wearing jewelry.

Test legs in usual way, several times, as suggested in previous tests.

IF Truscott "phenomena" is true, then method of testing legs at knees WILL relax muscles of one side, contract them on

other, and knees will show difference with knee-measuring device.

Experiment 6. You could try a sixth test, same as above, except facing North and South.

B. J.

July 28, 1945.

Dr. Sherman:

Dr. Pharaoh:

Here is another series of tests that can be tried:

Experiment 7. Have case lie East-West; then another test on another case, North-South.

Experiment 8. Have case lie BACK-DOWN. Measure length of legs at heels.

Then try your test at knees and see what it does by correcting heel lengths.

B. J.

July 28, 1945.

For purpose of recapitulation, it is recalled that Dr. Truscott measured the comparative lengths of legs of cases. He did this by producing pressure on inner tubercles of femora of both legs. He then went to upper cervical area, making a "spider-like, light touch" at different locations, superior to and inferior to atlas or axis, either left or right. He then went back to tubercles, produced pressure as before, measured legs.

From this procedure, he deduced where subluxation was, its direction, and whether there was or was not interference existing. If he deduced there was, he would adjust; then reproduce same procedure until legs were of equal length, thus proving the interference above "checked clear," etc.

This was called the "Truscott phenomena," etc.

On above date we called in eight test cases. They were tested in shielded and grounded booth, contrary to Dr. Truscott who said his "phenomena" would not work in a shielded and grounded booth. They were tested with ordinary jewelry, such as rings, watches, etc., contrary to Dr. Truscott who said his "phenomena" would not work that way. We had them lie back-down, contrary to Dr. Truscott's procedure.

We found one or the other leg longer, or shorter, in each case.

ALL we did, in each case, was to produce dual pressures just

superior to inner tubercles of the femora. Sometimes we produced pressure on only one leg; sometimes on other leg; sometimes on both. We did *nothing* at any time, to any case, *in the neck or at any other place than that mentioned.*

We found this kind of pressure upon one leg, leaving opposite alone, could change length of leg under pressure. We found that pressure upon both legs, would change one or other. As of this date (July 28, 1945) we have not determined whether pressure alone on long leg shortened it, or whether pressure alone on short leg lengthened it; but there is a rule that can be applied which will do what you want to accomplish.

It is fair to state that, out of eight cases tested, it worked on seven and did not change the eighth.

Referring to "REPORT BY DRS. SHERMAN AND PHAROAH," let us quote certain statements:

" *** how he noticed legs do change in length."

" *** as to when adjustment was to be given, when the pressure exists."

"He can't explain any of these reactions."

"He finds that if he takes two fingers that are positive in their reaction, ***." (Dr. Truscott contends the thumb, middle, and little fingers are positive, other two are negative.)

"The idea is that when a subluxation does exist, these contacts on tubercles of femora do produce an imbalance of legs."

"I am wondering if the electrical force has much to do with it."

"He said if you put a rubber band around the forehead, you can't get any of this."

This proves there is no "phenomena" at work; that there is no law other than what medical men call "a momentary physiological REFLEX," but which we prefer to call a momentary physiological Innate adaptation taking place, due to results following pressure which changes musculature contraction, or relaxation which changes length of leg, or at least produces condition which seems so for time being.

If this kind of test holds, to frequency on a greater number of people, it disproves the foundation for "Truscott" as a system, as a "Truscott phenomena," or as a reliable method of analysis for spinal subluxations.

July 30, 1945.

On this date we called in twenty students — ten male, ten female. We tested each on the inside-knee-pressure idea, face down, on table in timpograph lab.

This time, instead of seeing whether pressure did or did not work, we decided to find WHICH SIDE it worked on; whether pressure on short leg lengthened; or whether pressure on long leg shortened. The report follows.

Whereas Dr. Truscott has been working on the INCLUSIVE process, we decided to work on the EXCLUSIVE process — meaning that Dr. Truscott worked on BOTH legs AND on various places in the neck; therefore, when he secured a conclusionary change in length of legs, he attributed same to the last placed “spider-like” touch in the neck. This left him NO OTHER POSSIBILITY OF ANY OTHER CONCLUSION but that his last location of touch at neck lengthened or shortened legs below, etc. If he had produced EXCLUSIVE pressure on one or other leg ALONE, EXCLUSIVE of any other location of touch or kind of touch at any other place, he would have attained SAME result on legs.

With patient prone, objective of placing thumbs superior to inner tubercles of femora was “to test” legs to see whether one was longer than other. This was determined by whether one thumb was higher or lower at places touched than other. Accuracy of this method of measurement could only be certain WHEN thumbs were pressed into flesh DEEP ENOUGH to feel tubercles, and to be positive you were just superior to them. THIS PRESSURE — or “test” — was HEAVY ENOUGH PRESSURE to turn the trick. After making this dual “test” each time, Dr. Truscott went to the neck, made another INCLUSIVE light contact, then returned to knees and, WITH THE SAME HEAVY DEGREE PRESSURE, again made “another test.” This was repeated — neck and knees — sufficiently often that sooner or later REPEATED DUAL PRESSURE AT BOTH KNEES DID make a differentiation in their unequal lengths. So long as knees AND neck were done TOGETHER, INCLUSIVELY, and a certain result WAS attained, it was easy to hypothecate, conclude, and make a positive statement that THE DOING OF ONE PRODUCED RESULT AT OTHER; but when both knees were taken ALONE, exclusively, SAME result WAS attained, it was easy to make a positive statement that THAT ALONE attained THE SAME result.

A man STARTS working with a problem. For no apparent reason, he STARTS with six elements. He attains what he construes to be a solution to the problem. Not being of a scientific turn of mind (which means that he works WITH INCLUSIVE process) he attributes his success to THE SIX ELEMENTS. Working THAT WAY he can reach NO OTHER conclusion.

Ask him WHY SIX elements ARE necessary to attain the objective and he answers, “I don’t know.” Ask him WHY any one of five

attains the objective, and he will give the same answer. Ask him what **IS THE PRINCIPLE** involved — same answer. All he **KNOWS** is that when he works **WITH FIVE THE SIXTH** appears.

Sooner or later, in some manner unknown to scientists, he issues forth with the idea of "a new law"; some "phenomena" which he names after himself; comes forth with a "system" for which great claims are made.

Another man **STARTS** working that **SAME** problem. Working **WITH EXCLUSIVE** process, he begins **ELIMINATING** to find out **WHICH ONE** does what to whom and why.

He retains 1, eliminates 2. Gets same result as tho he **HAD** used 2.

He retains 1, eliminates 2 and 3. Gets same result as tho he **HAD** used 2 and 3.

He retains 1, eliminates 2, 3, and 4. Gets same result as tho he **HAD** used 2, 3, and 4.

He retains 1, eliminates 2, 3, 4 and 5. Gets same result as tho he **HAD** used 2, 3, 4, and 5.

As a result, he may or may not still make the statement that 1 produces 6.

Suppose, by way of further testing, he eliminates 1 and gets **THE SAME** result as tho he had used 1. Now what? 1 is **NOT** necessary to change 6.

Suppose, now, he works **ONLY** on 6 and gets **SAME** result. This proves that 6 works by itself, independent of 1, 2, 3, 4, and/or 5.

Suppose he decides to eliminate one-half of 6 — pressure on long legs — and gets **SAME** result. This proves that one-half of 6 works by itself, independent of other half.

Suppose he decides to eliminate other half of 6 — and let test cases relax, lying down — and still gets **SAME** result.

By now we are able to answer those questions: **WHAT PRINCIPLE** is involved, and **WHY** this does that to what. **RELAXATION** is the principle. Patient can relax without Chiropractor using thumbs on short leg just superior to tubercle of femur; or, it is possible that he can hasten reaction of relaxation by pressure at that — or some other of many places on legs or in lumbar region, especially on side of short leg.

So, we come out at the end, with the scientific deduction that 5 of 6 elements were unnecessary; that one-half of 6th was unnecessary; and, in fact, other half could also be eliminated and get **SAME** result.

Testing Short Leg — Face Down

No. 1 — Marvin Honeycutt

1st test: No

2nd test: Yes

No. 3 — Ross Kist

1st test: No

2nd test: No

3rd test: Yes

No. 5 — Harold Riesterer

1st test: Yes

No. 7 — Mardith Rueckwald

1st test: Yes

No. 9 — Charlotte Francis

1st test: Yes

No. 2 — Paul Tofanelli

1st test: No

2nd test: No

3rd test: Yes

No. 4 — Wilbur Landis

1st test: Yes

No. 6 — Winette Young

1st test: No

2nd test: No

3rd test: Yes

No. 8 — Shirley Moss

1st test: No

2nd test: No

3rd test: No

4th test: Yes

No. 10 — Edna Ackerley

1st test: No

2nd test: No

3rd test: No

4th test: No

5th test: No

Summary: Short Leg Only — 4 on 1st test

2 on 2nd test

2 on 3rd test

1 on 4th test

1 "No" on 5th test.

Testing Long Leg — Face Down

No. 1 — L. A. Hubbard

1st test: No

2nd test: No

3rd test: No

4th test: No

5th test: No

No. 3 — John Keller

1st test: No

2nd test: No

3rd test: No

4th test: No

5th test: No

No. 2 — Palmer Kickland

1st test: No

2nd test: No

3rd test: No

4th test: No

5th test: Yes

No. 4 — Lester Birchler

1st test: No

2nd test: No

3rd test: No

4th test: No

5th test: No

No. 5 — Paul Johnson

1st test: No

2nd test: No

3rd test: No

4th test: No

5th test: No

No. 7 — Marjorie Hunt

Both legs of equal
length

No. 9 — Elaine Falak

1st test: No

2nd test: No

3rd test: No

4th test: No

5th test: No

No. 6 — Dorothy Spiess

1st test: No

2nd test: No

3rd test: No

4th test: No

5th test: No

No. 8 — Doris Ducharme

1st test: No

2nd test: No

3rd test: No

4th test: No

5th test: No

No. 10 — Tillie Borth

1st test: Yes

Summary: Long Leg — 7 "No" on 5th test

1 "Yes" on 5th test

1 "Yes" on 1st test

1 Leg equal.

August 7, 1945.

Idea, in rebuttal, that may be advanced by Dr. Truscott is that any change in length of legs is temporary until such time as adjustment is given, the neck "checks clear" as evidenced by change in length of legs.

This is equivalent to saying that when adjustment is given on major subluxation, and it "checks clear," symptoms and pathology disappear, one of which could be change in length of legs. This we proved by proof offered in Volume XX, and is continuously evidenced by our contourgraphs of spinal adaptative curves. When CAUSE is corrected, EFFECTS disappear — one of which effects is difference in length of legs. This proves the Chiropractic PRINCIPLE sound in PRACTICE. None of this, however, justifies his "Truscott System" of analysis as being a correct or better one; neither does it prove a "Truscott phenomena"; nor does it prove a "new law of some sort of energy current" as yet unknown to him or to us.

This issue boils down to where Dr. Truscott works with many variables PLUS a constant. He attains the CONSTANT results and places the responsibilities upon VARIABLES for having attained it. In our research, we worked to ELIMINATE VARIA-

BLES, by seeking THE CONSTANT; and, having FOUND the constant, we can attain THE SAME result from applying the rule of the constant, ignoring variables.

The next question to arise, by the exclusive process of reasoning this issue thru, is: Granting we have twenty-five pairs of legs of unequal length, lying prone on a table, or face downward, for a period of time necessary for Dr. Truscott to make his "tests" between knees and neck, neck and knees — four, five, six, or seven times — would ordinarily RELAX the short leg sufficient to make it the approximate length of other, WITHOUT any tubercle-femora-knee-pressures and WITHOUT any cervical region "spider-like-light-touch" in the neck region.

That short leg relaxes and thus lengthens is now fairly certain. Would it relax WITHOUT ANYTHING BEING DONE, sufficiently to bring about the same conclusion?

August 7, 1945.

<i>Name</i>	<i>Time: 9:07</i>	<i>Time: 9:15</i>
Melva Rogers	Right short	Right short
Pearl Rogers	Right short	Even
Christine Sherlock	Left short	Left short
Lula Stevenson	Right short	Even
Alice Bader	Right short	Even
Annabelle Urban	Right short	Right short
Isabelle DeBortoli	Right short	Right short
Carolyn Lohr	Right short	Even
Laverne Lemans	Even	Right short
Edwinna Arnold	Right short	Even
	<i>Time: 9:10</i>	<i>Time: 9:15</i>
James Ploch	Right short	Right short
W. E. Schloss	Left short	Even
Bert Chapman	Left short	Even
Al Braswell	Even	Right short
Donald Cox	Right short	Right short
Michael Granus	Right short	Left short
Donald Dearborn	Right short	Right short
Robert Miller	Right short	Right short
Frank Morehart	Even	Even
Bob Shuman	Right short	Left short
Tom Drury	Right short	Right short
Paul Hunt	Left short	Right short
John Kolar	Right short	Even
John Prizer	Right short	Even
Cliff Martin	Right short	Even

Summary:

In this test, we had 25 cases lie flat on their backs on the floor. We desired to see what lying still, RELAXED, WITHOUT ANYTHING ELSE BEING DONE on neck or knees, would produce by way of change.

9:05 a.m.:

Right short legs — 18
Left short legs — 4
Even — 3

9:15 — after 10 minutes' relaxation:

Right short legs — 11
Left short legs — 3
Even — 11

9:15 a.m.: A break-down analysis shows the following changes:

R. short changed to L. short — 2
R. short changed to even — 8
L. short changed to R. short — 1
L. short changed to even — 2
Even changed to R. short — 2
R. short remained R. short — 8
L. short remained L. short — 1
Even remain even — 1

Out of 25 pairs of legs, 22 were of uneven length. After 10 minutes' relaxation, 10 had changed to even length of their own accord; 3 reversed legs; 9 remained same; 2 changed from even to one short.

Whether or not more would have changed, had test cases been permitted to lie longer, is an open question. Fact remains, as this evidence proves, legs WILL AND DO change comparative lengths by lying still and relaxing WITHOUT ANYTHING being done.

In any adverse report, those whose interests differ begin to sincerely and honestly try to figure WHY one should differ from them. What we anticipated is now beginning to occur.

Dr. S. J. Francis (California) who admits having taken every technique that ever came into California or was born there, including Truscott system, visited us in the fall of 1945, AFTER Drs. Truscott and Frisbie had been here with their system. In discussing this system with Dr. Francis, he said that what we described as taught HERE was not the same as the system Truscott taught IN CALIFORNIA. IF this BE TRUE, then California Chiropractors were cheated from something taught HERE; or the class of seven who took the work here in Davenport—including two of the PSC Faculty — six of whom paid \$100 each to get same, were cheated HERE from that which was taught IN CALIFORNIA.

We are not concerned so much with THE FACT as we are with THE ALIBI that was set up to try to make US HERE believe we did not get the real thing.

In addition to the above, we now receive the following letter. The part worth emphasizing is: "I am in a position to say that you DO NOT YET know just what takes place in Truscott's phenomena." "I think you have never personally witnessed it nor employed it."

In addition to the above (what we call) alibis, let us note this significant statement:

"We do question that ANY of us have, as yet, found a proper YARDSTICK with which ****." The yardstick is obvious. There is no "phenomena" once the yardstick is known.

Santa Ana, California, Oct. 15, 1945.

"Dear Doctor Palmer:

"You were undoubtedly as discouraged as we were with the findings of Dr. L. L. Truscott's work this summer. Facts ARE stubborn things to work with, and I know that in THIS office there has been, and still is, substantial agreement between the findings with NCM and X-ray and the findings of the Truscott Analysis. I do not know where the discrepancy lies; could it be because you did not yourself personally conduct ALL the tests?

"It was unfortunate that during our stay that you were ill, or were away, or both, which prevented our getting together over a patient and threshing things out. While you are convinced that you DO, I am in a position to say that you DO NOT YET know just what takes place in Truscott's phenomena; at least, I think you have never personally witnessed it nor employed it.

"We do not question the honesty, sincerity, or ability of anyone connected with the tests. Nor do we question the scientific accuracy of instrumentation. We do question that ANY of us have, as yet, found a proper YARDSTICK with which to evaluate properly the worth of the system.

"I would be very happy if you would mail me a copy of your findings, inasmuch as hearing them read but once and that hurriedly, I would like to be prepared to answer inquiries intelligently and with justice to both you and the good doctor from San Jose.

"Hoping this finds you in improved health, and not too burdened down with the tremendous load you traditionally DO carry, I am

"Granville K. Frisbie, D.C."

Refer back to Dr. Frisbie's letter of May 20, 1944, in the fore part of this report, where, under point 3 he says:

"It agrees with neurocalometer in readings and surpasses that instrument in delicacy because the heat problem is OUT."

Now note, in Dr. Frisbie's letter of October 15, 1945, he says:

"Facts are stubborn things to work with, and I know that in this office there

has been, and still is, SUBSTANTIAL agreement between the findings with NCM and X-ray *****."

Copy of letter addressed to
Dr. Sherman.

Wausau, Wisconsin, January 7, 1946.

"***** What have been your conclusions as to Truscott? I find it too slow for one thing. I still check every new case at least once with it, as a matter of experimentation, but as to a regular procedure with my fees I would starve to death. There seems to be a definite tie-up between pelvic imbalance and upper cervical pressure, but I don't think Truscott has the whole story; but I believe my money was well spent and that I am a better Chiropractor for it. I also find that the proper recoil adjustment given correctly will do more than Truscott and Frisbie know about. I also have found with the TC check to aid analysis and the right line of drive according to the condyle angle and rotation that more of my adjustments are going home and staying put for better results. I have also been experimenting with pelvic corrections by adjustment of ilii on certain cases, and find sometimes it speeds results and sometimes it is BAD.

"L. L. Kenyon, D.C."

Report of Student Correlation Club Committee

Investigating Demonstration of

Truscott System of Analysis

In The B. J. Palmer Chiropractic Clinic,

July, 1945.

On January 8, 1949, a committee of the Student Correlation Club investigated the circumstances and results of the demonstration made in The B. J. Palmer Clinic during July, 1945, by Drs. Truscott and Frisbie, of the Truscott System of Angular Analysis and Controlled Adjusting. Special facilities were granted the investigating committee by Dr. Palmer who made available a voluminous and detailed report which was compiled at the time of demonstration. It is apparent that Drs. Truscott and Frisbie were allowed every opportunity to demonstrate the system fairly.

Dr. Truscott's system of Angular Analysis is based upon the activation of alleged reflexes in the spinal musculature by transmission upon contacts of a nervous or electric potential present in the analyzer's fingertips. For adjusting purposes, the two doctors used, during the demonstrations, a combination of diversified techniques and toggle recoil on atlas and axis or on both. The system does not

utilize instruments such as NCM, NCGH, SPGH, and indeed does not entirely recognize the findings of such instruments.

During July, 1945, Drs. Truscott and Frisbie demonstrated the system in The B. J. Palmer Clinic. Ten test patients were made available for a period of two or three weeks. They hoped that the system would be adopted and taught at The P.S.C., if their demonstration was successful; and that it would be announced at the Golden Jubilee Lyceum of 1945 as a great new advance in Chiropractic. There was at no time the suggestion of financial gain by Drs. Truscott and Frisbie, whose sincere motivation cannot be doubted.

The procedure was to analyze the ten test patients by the standard Clinic methods—NCGH, NTM, SPGH, 'timpograph. Drs. Truscott and Frisbie, then, unaware of the Clinic findings, were allowed full scope with their own system. The object was to compare the two sets of findings.

The results, as shown by the reports and records of the demonstration, reveal that Drs. Truscott and Frisbie agreed with the Clinic listings in only 35 per cent of cases.

However, a certain individual has stated that the system reached 100 per cent accuracy during the test in The B. J. Palmer Clinic, and claims that the system is highly approved by Dr. Palmer. This is a gross misrepresentation of the facts. Dr. Palmer's opinion is indicated by this quotation from the report:

"There is nothing scientific in the Truscott approach to analysis or adjustment. The report proves that the adjustment was a hit-and-miss, varying from one to as high as twelve so-called adjustments being given from either or both sides on atlas and/or axis.

"Results proved less than would automatically be expected under The B. J. Palmer Clinic processes. Majority of cases either showed no improvement or were worse after getting through with the tests.

"Dr. Truscott's method was proven correct or incorrect by the short or long leg process. The report proves that in a vast majority of cases where nothing was done by Dr. Truscott on the neck in any manner, the legs became normal or tended to become normal through nothing more than relation with patients lying on their backs.

"In the light of this report, this Clinic has not and cannot endorse this system as any advance in accuracy, efficiency, or better results."

Since this individual has published and distributed a brochure to a large number of students and field Chiropractors, the committee considered it advisable to investigate the truth of the matter and to issue this report to correct any false beliefs that may have arisen.

Committee: John Clarke
Chairman

Anthony Malangone
Everett D. Johnson
E. Walter Morrill

Our work here is building scientific, recorded, mechanical findings, seeking positive knowledge based on facts, data, and proof, to finally emerge with A SPECIFIC vertebra, a SPECIFIC direction of subluxation, a SPECIFIC adjustment, attaining one SPECIFIC objective, a SPECIFIC pre-check and post-check. This work is all done, pre and post, proving it right or wrong, whether our specific exclusive process does or does not attain its objective.

While it is true each case is a rule unto itself, it IS possible to decipher and break down application of that rule to EACH case, IN ADVANCE of giving adjustment. It is not necessary, in this day and age, with work now at our command, to begin twisting, wrenching this or that vertebra, this or that direction, in the hope that we can use some one of various methods beyond scientific proof, and finally find out by dangerous experimentation what that rule is in each case.

We confine our EXCLUSIVE SPECIFIC work under observation. Eventually, we make or break. So far, we have been making, to our satisfaction.

We have said many times that no matter what method or means is used, IF USED ON THE SPINAL COLUMN, it will get a certain percentage of cases well. We have also said that no matter what method or means used, IF USED IN ATLAS-AXIS area, better percentage of results will be obtained than if used all up and down spinal column. Drs. Truscott and Frisbie are to be congratulated on confining their work to major vertebral subluxation area. If we were to criticize their work, it would be that they have not applied scientific means at the command of man to prove or disprove their work. If they had, there is much they would have dropped and changed long ago. They have reached conclusions based on opinions. They have secured a sufficient percentage of results to justify themselves in thinking they HAVE something better than any other method. This we sincerely question for reasons stated above.

Science relies upon its data, evidence, and facts. Science does not build evasions of data, deceptions of evidence, or misrepresent facts. If an issue has merit, is truth, it will stand on its feet clean-cut. If, in course of investigation or demonstration, it becomes necessary to becloud an issue with smoke screens to deceive observer or investigator, this fact in itself builds a wall of suspicion of how much

merit there is in any of it. As this statement is a clean statement of fact, devoid of feeling in the matter, cards open and face up, so does science conduct itself at all times.

Magic is the art of mis-direction. We ask you to watch our left hand; and while you watch the LEFT hand, the right hand does the trick. Such men as Thurston, Houdini, Dante, and Blackstone have been close personal friends. Millions of people have sat in front of their shows and have seen the "impossible" actually accomplished before their eyes. They saw elephants disappear instantly; they saw a woman seated on the stage, and the next second she was in a box high above the theatre; they saw a woman suddenly disappear from one side of the stage to the other; they saw a woman rise in the air without supports, etc.

Yes, the art of magic is mysterious and mystifying from front. Go back-stage and see how all these tricks ARE done — for tricks they are. They now lose their magic and become commonplace, understandable performances, all of which come entirely within the realm of well-known simple principles. Spiritualism mystifies millions. They talk to dead loved ones. And, in our lifetime we have known many of the greatest and have exposed some of the world's greatest. It is simple trickery, easily exposed, the apparatus for which is on the market and can be bought for a few cents to a few dollars. Our background fits us to separate elements of reality from mental cobwebs which otherwise mystify the uninitiated who sit out front and marvel at the impossible, made possible by the art of magic.

The practice of the art of deception can be either innocent or deliberate. It also can be within ourselves to ourselves, or within ourselves to deceive others. The art of magic is DELIBERATE deception within the magician to the public whom he entertains. Art of practicing medicine is INNOCENT deception within physician to patients whom he treats. *Our profession has deceived itself so often, so many ways, that it is embarrassing when we look backward and think of millions of lives, money, and time wasted.* Let us cite one example: Abrams with his ERA. Abrams was innocent of deliberate deception. Medical profession adopted it, later to deny it. This was followed by osteopathic profession adopting it, later to deny it. Still later, Chiropractic profession — hundreds of them — went nuts about it. They, too, in time denied it. Today few use it. Scientists, meanwhile, everywhere denied it had merit. We denied it. Chiropractors raved over it. We maintain it was and is a fake and fraud. Meanwhile, deception went on — innocent as it was.

it doesn't take great or profound intimate working knowledge with people or things to separate wheat from chaff, real from theory, substance from shadow, fact from mystery. It will be contended we do not know the Truscott system, therefore are in no position to suggest, criticize, or command intelligently on its relative or comparative value. During fifty-five years we have been compelled to explain hundreds of so-called "phenomena" which have been presented to our profession from time to time. We found they were all deducible to words of one syllable. We have seen hundreds come and go. The Truscott system is another opportunity to do the same. We have lived thru periods of marvelous sensations, when some issue even had our faculty and student body spellbound, unable to explain what was happening and why. Even we were mystified for a while. To mention a few: The Parker Famous Lumbar Adjustment; The Freenor Evolution; The Bailey Radi-omics; Abrams ERA, etc. But, once facts were sifted out, they dispelled mystery and when brot down to tangibilities, each turned out to be as simple as any other principle and practice.

Relationship between guest and host is well defined. Drs. Truscott and Frisbie came here to demonstrate their system. We were the host giving them opportunity to do so. Meanwhile, we are running a school and a clinic, doing work different from that which they were here to demonstrate under test cases.

Obviously, what they had or did not have was a matter under consideration. Whether good or bad, was a matter on which they were asking our opinion. Betwixt and between time they came and left, there was a good deal of talking going on and — were we inclined to take issue — we could have done so on serious grounds. Dr. Frisbie, on various occasions, took occasion to tell our students that what they are getting is wrong; what we are doing is not the best; what students need to be taught is the Truscott system; etc. Such opinions were broadcast to students who came here expressly to get our work such as we teach. At one time, such issues became so bold as to ask if they could practice their system on some patients in OUR clinic who came here to get OUR work.

We admire courage and conviction, but we deplore lack of etiquette which was not displayed at times during their visit. In fifty years, this is one of several times we granted unlimited, unrestricted privileges, to come into our organization and institution. That privilege was abused. It has taught us another lesson.

Dr. Frisbie is a natural promotor. He would rather promote something than eat. He is a Lo-HI pressure promotor. His dominating motive is pro-motive. What do we mean by Lo-HI pressure?

He is honest with himself; therefore he would not promote something which to him was dishonest or possessed no merit. But, let him get hold of something WHICH HE THINKS HAS MERIT, and he becomes a HI-pressure promotor of same.

If we were an opportunist and took advantage of circumstances, played the commercial game with an idea of picking up ideas here and there and reselling them to the profession, regardless of future welfare of a sound, sane, sensible Chiropractic, we would agree with Truscott, accept his donation to the profession, and incorporate it as part of our curriculum. On the reverse, we have taken the hard way thru, believing it to be the soundest position on judging issues for lasting and permanent value.

It is not the easiest thing to bring out an adverse report, knowing how much this means to them, but we must present issues as we see them, regardless of consequences in criticism which may come. We do know this, tho, after all is said and done, after fifty-five years, there is ONE person whom the profession looks to and respects, because he HAS been proven right in the long run. It was THAT confidence which brot Drs. Frisbie and Truscott here. It is THAT confidence which still makes BJP the leader of his profession, which makes The PSC stand out as THE outstanding school, which makes THE SPECIFIC the objective all wish to attain because of its final scientific correctness. None of this sort of a reputation could have been attained had we adopted and adapted everything offered us in years past.

There is no desire to deny or destroy; to minimize what has been presented and demonstrated. There is a sincere desire upon our part to explain the how and why of what has taken place, and place it all in its proper category of values based upon experience gleaned from fifty-five years of thinking with the Chiropractic principle and practice, more particularly the past 15 years, in sound, scientific, recorded research.

We have cooperated to every extent possible. We have taken the position that we will forsake anything we knew yesterday if someone can prove he has something better tomorrow. But we cannot see where guessing on atlas, axis, or cervical; break, rotary, or recoil; lateral, anterior, or posterior, is any improvement.

To disagree is to be unpopular. To agree with everybody is to be unpopular with everybody, because you agree with nobody; and, what is worse, one has no convictions of his own. To defend convictions is to be true to oneself. This we have always done, regardless of price it costs. We must sustain the best in Chiropractic, for

the sake of its future. This we are doing, without fear or favor, with this series of tests and where they lead.

We are not condemning the Truscott system. Neither do we commend it as the best at our command. His system is better than many used by our profession. It is not, however, the best which can be used by our people.

Drs. Truscott and Frisbie came here upon mutual solicitation, whereby we mutually agreed to put "The Truscott System" thru tests to establish its relative values.

They came in good faith, with clean hands. We invited them to come in the same spirit. They closed their practices for the time being, were out the loss of their practices, meanwhile; they were out the expense of coming, going, and living here. They came with the idea of presenting the system to The PSC to be taught our students. They were willing to give it to us for the good of humanity. All this shows a more than above average sincerity of purpose in a humanitarian cause. And it seems ingratuitous for us to be compelled to tell them we cannot see where what they have is an improvement upon knowledge we have builded here, use here, as well as teach here in THE SPECIFIC SUBLUXATION AND THE SPECIFIC ADJUSTMENT and all that precedes, leads up to, and follows that. It would be easier for us to flatter them by telling them that what they have IS great, accept same with a smile, give them full and complete credit for it all; but we would be a hypocrite to ourself, our cause, our birthright and heritage, and the welfare of future of mankind, did we do so.

We can say, tho, that they have two outs: either desire to learn more that is now known; step up their efficiency beyond anything they NOW dream of; or, return home and continue to teach their work to all they can; for, out of teaching WILL COME a great good to a great number, because they will take them away from mixing and away from the lower backbone and bring them up to the real source of all cause of all dis-ease; and in so doing they render them a good, as well as the people they serve.

The Story of WHY AND HOW

All of us are vitally interested in two things:

1. A philosophy of living

A philosophy of answering problem questions which arise

A philosophy of heaven or hell — where do we go; what to do to be saved; is there a future existence of some kind, somewhere?

These and more questions arise.

To us, our Chiropractic philosophy is all-sufficient to find answers.

2. A philosophy of how to earn a living

A philosophy of how to better earn the right to live here and now;

— how to better serve our fellow man to justify our existence;

— how to practically apply our philosophy of life.

In this philosophy of living, we must live with ourselves — and for others. Thus living with ourselves is what causes much thinking. It raises many problems. We try to solve them.

Let us try to think them thru.

1. Religion establishes a basis of "faith and belief."

2. Philosophy establishes a basis of WHY this and that.

3. How much do we actually KNOW about either?

1. We KNOW, by use of logic, reason, deduction, and understanding, that

— there IS a Universal Intelligence, call it what one may.

— it HAS run the world, IS running the world, and WILL run it from here on in.

— there IS an Innate Intelligence in all normal, natural, composite objects.

— that intelligence or those intelligences is or are all-wise, all-powerful, all-omnipotent, always present.

Beyond that, what do WE KNOW?

2. We KNOW that when that intelligence or those intelligences is or are at work, all is well;

— that when there is an interference with the rules, regulations, and laws of those intelligences there is trouble.

— that man often tries to substitute HIS educated opinions and theories for them.

— that when he does, man and everything he contacts suffers and goes wrong.

3. We DO NOT KNOW whether or not there is a hereafter

— whether they are actual places, or conditions here and now. We have our opinions, theories, which may be right or wrong.

— where we come from or where we may go.

4. We DO KNOW we are now alive, thinking, acting, moving beings.

— some day we are going into a state of what we call death.

— life means union of the abstract and concrete — the spirit and body.

— death means dissolution of those elements from each other.

5. WE DO KNOW that when a baby is born, Innate Intelligence takes possession and runs it till death.

We DO NOT KNOW where that Innate comes from.

We DO KNOW it is capable of running that entire body in health, and endeavors to do so in sickness.

We DO NOT KNOW where that Innate will go when it leaves the body.

We DO NOT KNOW whether or not it retains its personality and individuality, as it did in life.

6. We DO NOT KNOW whether or not the individual Innate is a part of the Universal Intelligence.

— whether or not the individual Innate is apart FROM that Universal Intelligence.

7. When a dear one dies, we would like TO KNOW whether he is still with us, seeing, hearing, knowing what we are thinking, saying, or doing about the life he lived.

— whether or not we can communicate with him after Innate left his body.

We wish we could do this. We wish we knew how, if it is possible.

All these have a veil of secrecy, a curtain is drawn, and we educated mortals do not know the answers.

8. It seems to be a part of the Great Scheme of things that educated man is NOT to know these answers.

If he did, he might interfere with and upset the Great Scheme; he might so disarrange the rules, regulations, and laws, as to upset the Universe.

9. We CAN conceive that if man KNEW beyond his education, he might try to build babies to suit HIS convenience;

- he might prefer a girl to a boy, or vice versa
- he might want her beautiful, rather than plain, ugly
- he might prefer red, brunette, or blond hair
- he might change size, shape, or weight of child
- he might try to establish a genius to his own liking
- he might try many other things, if he could.

And IF he COULD do these things to babies, what might he not try to do to the world?

10. So it seems to have been the judgment of the Great Intelligence to make certain things beyond man's reach;

- to give him a limited ability to direct
- to make education finite; Innate and Universal infinite.

All great movements of history came in a peculiar sequence.

1st. The art — AN ACCIDENT happened from which a result occurred.

2nd. The science — how to duplicate the accident TO REPEAT the result.

3rd. The philosophy — WHY did it occur?

DOING THE THING came first — ART.

HOW it was done came second — SCIENCE.

WHY it was done came third — PHILOSOPHY.

D. D. Palmer did something which restored hearing of Harvey Lillard.

HOW was it done? Then came desire to formulate a science around that art.

WHY was hearing restored AFTER a certain thing was done? Then came desire to formulate a philosophy around the science.

A vertebral subluxation is PROduced by a VIOLENT concussion of forces.

A vertebral subluxation can be REduced ONLY by A REVERSAL of law of PROduction.

Example: Man falls off ladder. Concussion of forces which PROduced subluxation was more than a finger-touch at area of subluxated vertebra. Concussion of forces necessary to REduce subluxation MUST BE MORE than a finger-touch at area of subluxated vertebra.

If that be sane, sound, sensible, then theory that a finger-touch is all that is necessary to REduce a vertebral subluxation is purely an opinion, an idea which time will defeat.

In our early years, all we had was a crude method of DOING the thing.

Later, we began to research HOW to do it.

Still later, we began to understand WHY disease was caused, WHY disease could be restored to health.

None of these conclusions CAN BE broken down by antipodal or contrary methods.

Place a rock on a blade of grass, and it will stop growing.
Remove the rock, and it will grow again.
It takes more than a feather touch to remove the rock.

A foot on a hose will stop water flowing.
Remove the foot, and water will flow again.
It takes more than a finger-touch on the foot to remove it.

These conclusions of fact cannot be denied by theosophical theories.

We live or die by soundness of facts with which we work.

Accidental accidents PROduce subluxations. Can this be denied?

Intentional accidents REduce subluxations. Can this be denied?

Only by inverting reversed law can we overcome effects of reversed law.

Ultimately, Chiropractic lives or dies by whether we do or do not get sick people well.

Some of us know this too well.

Consequently, some of us have confined our actions, thinking, and reasoning to accomplish that ultimate end, regardless of whether in our art, science, or philosophy.

Research HERE has been exclusively devoted to THAT end. That we HAVE accomplished those objectives is obvious. If we had not, we wouldn't be here now; we would have died long ago.

That, too, should be obvious to our profession.

In past fifty-five years, we have seen theories galore, come and go. We have seen visionaries rise and fall, by thousands. They exist a while, have followers, and when they fail to get sick people well they die, and many of our profession die with them.

No matter how peculiar such fantasies are, to say the least, there are always some people fantastic enough to forsake solid ground and wander in swamps. This is to be expected.

It is surprising what a large percentage of otherwise fine people go chasing flying discs, wild fantasies, glorious will-o'-the-wisps, pots of gold at feet of rainbows.

Some of these schools start in at the head, treat skull bones, come all the way down the back, throw in arms and legs, treat feet; turn 'em over and treat bellies; irritate disease thinking to make it better, hoping to God they come out somewhere, in some mysterious way, with something which will drag patient back tomorrow so they can get another dollar out of him. They don't know WHAT they do; they have no WAY of doing; and ask them a reason WHY and they are at sea without a compass or rudder. Ask any post-graduate who comes here.

The PSC is THE ONLY Chiropractic school which teaches AN ART of doing the *RIGHT* thing, at RIGHT place, in RIGHT manner, at RIGHT time — and PROVES its case; which teaches A SCIENCE of how to do; then establishes sane, sound, sensible reasons WHY we do everything as we do it. Still we have students who look for baloney somewhere else.

There are those amongst us who prefer to pacify the crying Chiropractic baby with soothing mental Castoria, believing this is the way to feather their nests. They come out the small end of the funnel in the long run.

Then there are feeders who prefer to defend, protect, and preserve the Chiropractic philosophy, science, and art in its purity for posterity, so generations to come may get well. This group always have come out the larger end of the funnel, in the long run.

It is surprising what a large per cent of people trample in a mob riot the very lives upon which they live and thrive.

Lewis calls strike after strike. This chases furnaces to oil. This means less demand for coal. This raises price of coal. This chases more people to more oil. Lewis was chasing for higher labor income which raised higher labor costs, which again increased cost of coal per ton, which chased coal buyers to buying cheaper oil, which

means less labor hours per week, less days work per week. If that keeps pyramiding, there will be no demand for ANY coal.

He reminds us of the way some Chiropractors think and act. They want something for nothing, without effort, like Cascarets which work while you sleep.

(Above prophecy re Lewis was written in March, 1950. In April, 1950, came following quotes from THE DES MOINES (Iowa) REGISTER, April 3, 1950:

("FEAR 50,000 MINERS SOON WILL BE IDLED

("Shifts to Oil, Wage Boosts Close Pits.

("New York, N.Y. — Nearly 3,000 Pennsylvania miners *have been idled through the closing of high-cost coal mines in the four weeks* since the United Mine Workers won higher wages, leading operators reported Sunday.

("They predicted that the number of displaced bituminous miners *would reach 50,000 or one-eighth of the national total of 400,000, by mid-summer under the combined pressure of price resistance and higher labor costs.*

("Rescind Increases

("Most large producers *raised* their prices by 10 to 30 cents a ton after the contract with John L. Lewis' union was signed last month but many have had to wipe out the increase to keep their customers.

("So sharp have been *the inroads of fuel oil* into the market for coal along the eastern seaboard that large consumers in the metropolitan area have been offered coal at prices from 15 to 35 cents a ton below those prevailing before the wage agreement.

("Operators contend the only way they can prevent further loss of customers is to concentrate production in their most efficient mines *and close down* those in which it costs too much to bring out the coal.")

Ninety-five per cent of people are moved into spasmodic action by emotions, passions, prejudices. Knowing this, a few of the 5 per cent of people who use logic, reason, and facts take advantage of these weaknesses of the 95 per cent, and move people accordingly.

Five per cent of people are moved into action by logic, reason, and facts. Because only 5 per cent use logic, reason, and facts, is why some who starve on emotions, passions, and prejudices come here and go out failures; and why smaller 5 per cent come and go out successes.

We know of no way to change this human failure and success scheme of things except by education.

We here have been trying for years to convert people with emotions, passions, and prejudices, into logical, reasoning, factual-thinking people. We find it difficult.

As we make our bed, so do we lie in it.

In beginning of discovery of any new practice, when principles and practices of a new profession of sickness and health were in chaos, we begin working from chaos to cosmos, working backwards FROM practice TO principle. Later, when it is more matured in development, understanding some logic, reason, and facts of the cosmos, we reverse process by using that knowledge to solve further problems of chaotic emotions, passions, and prejudices of chaos that exist in form of sicknesses of human family. When a profession has been standardized, as is now true of Chiropractic, we work FROM knowledge principle DOWN TO systematized practice. We start with reason WHY, then to scientific HOW, then with art OF DOING the method of getting sick people well. Those people who suffer with chaotic sicknesses of emotions, passions, and prejudices are still trying to work backwards from chaos in practice to knowledge of principles, not having reached it — and possibly some of them never will.

It might be better to define what is meant by “emotions, passions, and prejudices.” In an EMOTIONAL state, a person flies off into a crying jag, drinking jag, love jag, etc., without knowing why. In PASSION, he gets mad, goes haywire, kills, fights, and otherwise is destructive in sudden rages, without knowing why. In “prejudice,” a person may hate Jew or Catholic; Republican or Democrat; white, black, yellow, or redskin; male or female; or vice versa, without knowing why. Certain types of public speakers gather a group of people, frenzy it into a mob; take peaceful people, harangue them into violence by inciting destructive activities; converting them as sensible individuals to frenzied mobs, bringing about strikes, burning homes or factories. Hitler was a master at this art. His pet phrase was “Tell a lie often enough and people will believe it.” He played on emotions, passions, prejudices of “the pure Aryan race” and built a mass international hatred of Jews and all religions, bringing about murder of millions and downfall of himself, his country, and his people.

It might also be well to define what is meant by “logic, reason, and facts.” Use of logic means we calmly, seriously, sincerely, honestly think a vital problem thru to its objective, weighing angles and elements. With “reason” we study principles and practices, weigh contributory factors, right and wrong, good and bad, constructive and destructive, and come out with a positive definite conclusion for action. “Facts” consist of issues which are based on known constituents, such as “today is Wednesday,” “this is March,” “this is spring of the year” — all abstracts, yet FACTS. Wood,

paper, iron, steel, rubber, wool, lamps, etc., are concrete FACTS. The well-balanced person is one who takes all these, balances them one against other, and establishes a plan of action for his life's activities. When he does, he has "found himself"; he has laid a foundation pattern for sane, sound, sensible, helpful, healthful, right living.

In religions, we call people who play up emotions "evangelists." They preach to beat hell. They exhort the congregation to a high pitch of emotionalism and stampede the crowd up to the altar or into cash donations with a frenzy of religious fervor and hysteria. "Hallelujah! Amen!"

In politics, we call people who play up passion participation "rabble-rousers." They play on fear, anger, and temper like an organist plays music. They are experts in the know-how. They pitch the mob into a high state of destructive actions.

In health matters, medical men play on cancer, the scourge "that strikes one out of four"; "epidemics" of polio, one dread disease after another that kills; tuberculosis "that scourge of mankind that kills without warning"; etc., without end. They play up horror of the seen or unseen germ monster which attacks, destroys, and kills without warning — "you may be next."

We also have another type of pre-judging person — the glorifying seekers of self-glorification. They go to the immaterialistic extreme. They inject unrealistic, impractical, high-sounding, meaningless phrases which move emotional types to think theories are logical, idealistic; hypotheses are reason; unworkable methods are factual.

Given time, all these do no harm; for logic, reason, and facts strike their natural, normal level. Fundamental law cannot be changed by educated men with idiosyncracies. Somewhere there is a balance needed between head and hand, what it thinks and what they should do.

While man is trying to locate his balance between mind and hand, thought and action, Innate and function, time is taking its toll of YOUR lives, YOUR practices, YOUR incomes; sick people are getting worse; all of which sets you back in lost time which should have been devoted to logically, reasoningly, factually developing yourself and building a practical business of getting sick people well.

A. T. Still philosophy:

"The rule of the artery is supreme.

Disease is because of obstructed, impure blood.

We will cure it by using bones as fulcrums and levers to stimulate and purify the stream of blood."

D. D. Palmer philosophy:

"The rule of mental impulse, thru nerves, is supreme.

Disease is because of reduced quantity flow of mental impulse.

It will be cured, if, as, and when interfering medium — vertebral subluxation — is corrected."

Such men as Drs. McLaughlin, Hildreth, and others held to the true A. T. Still art, science, and philosophy.

Along came Charlie Still who founded the College of Osteopathy in Des Moines. He did not hold with his father. He believed in more medicine, more surgery, and less osteopathy.

Today, osteopathy is "osteopathic physicians and surgeons." They have gone hog-wild. Osteopathy is almost a dead issue. They prescribe drugs, inject hypnos, perform operations for most everything.

Will Chiropractic go the same way?

The PSC is the bulwark and Gibraltar of ten-fingered, by-hand-only, D. D. Palmer philosophy, science, and art, because we can prove its premises sound and practical.

In a sense, there are three so-called Chiropractic camps:

1. One which does not believe in ANY philosophy. Five schools could be mentioned.
2. One which believes in going physiotherapy, naturopathy, physicians and surgeons. Three schools could be mentioned.
3. One which believes our PHILOSOPHY and goes off on a tangent of theosophical, metaphysical, theological, spiritual, so-called science and art.

We wonder why student is emotional, passionate, and prejudiced. We wonder why he uses little logic, reason, or facts to balance himself. We wonder why he becomes unbalanced and leans like the Tower of Pisa to one, two, or three of above unbalanced types of what these people CALL Chiropractic.

What will become of CHIROPRACTIC? That depends upon its adherents: If we can take the emotionally unstable and make them into logical, reasoning, and factually balanced thinkers, Chiropractic will live. Can we? Who knows?

If we can, day will come when Chiropractic will grow into a separate and distinct profession, serving millions, adding millions of years to millions of lives, and step up the efficient and economical value of the human race.

The Story of ADAPTATIVE CURVES

(8 x 36 Spinographs, Stereo-Spinographs, Comparative Graphs, Electroencephaloneuromyotomographs Research — What They Are and What All Reveal.)

The PSC Commercial X-ray Laboratories were first to expose, develop, and interpret 8 x 36 full-length, single-exposure spinographs. It was so new that Eastman would not "play with" idea of making experimental films that size; said single X-ray exposures that size "couldn't be done." Buck was willing to experiment with us — so today they have lion's share of that business.

Before 8 x 36 full-length, single-exposure spinographs, we had been taking spinal columns in sections, usually three separate films, which we tried to piece together, end for end, section for section. This was never satisfactory.

Reason for an all-length single film spinograph was to see what single film full-length revealed. Were spinal columns straight? Were they curved? Were they full of curvatures? Were the curves, if any, adaptative? Were they fixed or subject to rules of floating conditions? What were percentages of each? We call ourselves "spine specialists" — how much did we know about spinal columns? How many questions could we answer *from facts* known? How much of what salesmen sold was reliable, authentic, would work? How much were they duping themselves, duping us as buyers, thinking they had something and we NOT knowing whether it was another pig-in-the-poke or something that sounded good but wouldn't stand up?

These and more questions arose, for which we then had no answer. Facts, before and after adjustment, needed to be answered. Upon securing thousands of 8 x 36 full-length, single-exposure spinographs, it became apparent 98 per cent of people had *adaptative* curves, either scoliotic, lordotic, or kyphotic. They were not, in pathological or traumatic sense, "curvatures". They were, strictly speaking, "adaptative curves" — adaptative to balance, compensatory to weight equilibrium of an off-set head above, due to atlas wedge-side-slip subluxation.

Page 292, THE SUBLUXATION SPECIFIC, THE ADJUSTMENT SPECIFIC (Volume XVIII, Palmer) says:

"Adaptative or Compensatory Curves

"For several years The PSC Spinograph Laboratories and our field research work have developed a technique for taking, developing, and interpreting several thousand full-length, single-exposure, spinal column spinographs. Ninety-eight per cent of these showed adaptative or compensatory curves in the

several parts of those columns. Location, character, direction, and degree of any or all compensatory or adaptative curves depend upon pivotal point of superior gravity of head and its condyles upon atlas, which might be left or right of center, or anterior or posterior on condyles. Atlas wedge-side-slip subluxation shifts gravity weight balance point from side to side and from backward to forward or vice-versa, hence shifts position of head above and spinal curves below. Center of gravity weight balance depends upon degree of wedge-side-slip, degree of anteriority, degree of superiority, or inferiority. Generally speaking, all articulations in all people, between occiput, atlas, and axis, are normally builded alike. Specifically speaking, each person has a special size, shape, and slope of each articulation between occiput, atlas and axis, which tends to produce individual adaptative and compensatory curves as result of his or her atlas or axis subluxation. General rules can be laid down for the many. Specific rules must be laid down for the individual. This accounts for why we can establish a general rule for adaptative or compensatory curves and also why it is sometimes specifically opposite and contrary to same direction of atlas or axis."

If atlas was subluxated with right side-slip wedge and head was high on right, head leaned low on left

cervical curved lateral to right

dorsal curved lateral to left

lumbar curved lateral to right

pelvis was high on right

left leg was seemingly long, etc.

This, or its reverse, was the rule subject to variations. If head was unbalanced anterior or posterior over chest or shoulder, it threw spinal column into additional lordotic or kyphotic compensatory or adaptative curves to lateralities, etc.

Taking single-exposure full-length spinographs under precision posture constant, preceding and following adjustment of atlas side-slip wedge specific and making comparative graphs from same, gave definite and positive information of *natural* corrections, *natural* lengthening of, and otherwise letting Innate Intelligence in case make necessary restoration of positions of individual vertebrae, collective groups of vertebrae as well as entire spinal column curves. Graphs are based on full-length exposures made upon entrance of case and are again taken upon leaving Clinic. This visually presents natural changes which have taken place during interim which vary according to case. It would be impossible here to go into clinical facts and figures. They prove specific atlas adjustments DO permit *natural* correction of abnormal compensatory spinal column curves. In this work, nothing is done with treatment of spinal column, pelvis, legs, feet, etc. Those parts automatically correct themselves when cause is competently, correctly, and efficiently adjusted.

Page 293, Volume XVIII, Palmer, further makes following statements:

"There is a small group in our profession to whom everything is 'spinal balance.' That there are compensatory or adaptative abnormal curves in a spine is herein explained. To 'adjust' to correct these abnormal curves to establish 'balance' is to treat effects of a cause. Temporary, accidental, and occasional RELIEF can be obtained. The 'spinal unbalance' will return so long as cause exists and has NOT been corrected. Much better to adjust THE cause and let Innate Intelligence establish her own natural and normal balance.

"There is another small group in our profession to whom everything is 'general vertebral mechanical correction' of every vertebra in spinal column. They look, they see that every vertebra is misaligned. Why such does exist is herein explained. To 'adjust' each vertebra, with an idea of aligning them, is to treat effects of a cause. Relief obtained may be temporary, occasional, and accidental, only to return because THE cause has NOT been corrected. Much better to adjust THE cause and let Innate Intelligence establish her own natural and normal alignment of each vertebra.

"There is still another group in our profession who have also observed this same series of adaptative or compensatory effects and symptoms that are sequences of a vertebral subluxation. They note, beginning from below, that one leg is shorter, pelvis is tipped, vertebral column has abnormal curves, muscles of back region are contracted or prolapsed or both, ligaments are taut or slack. Believing buttock region to be intermediary seat of balance control, they offer a secret method of tipping ligamentous 'guy-wires' to establish muscular control to create a normal straight spine, to level pelvis to lengthen legs, to create health. That they observe these effects is to their credit. As a method of treating effects, it gets temporary results. It takes the average Chiropractor three to six months to realize that effects are NOT causes; that CAUSES cannot be corrected by treating symptoms; that THE cause is not basic in buttocks; that permanent health is established by adjustment of vertebral subluxation cause at inception — atlas or axis."

In fall of 1936, we began to develop 8 x 36 *stereo* spinographs to further give depth or third direction in study of this problem and its solution; developing not only X-ray technique for exposing same, but developing an 8 x 36 stereo reading box and frame, etc.

Based upon this proven series of clinical and spinographic facts, came above mentioned three groups of what and how to iron out (via treatment of effects) these curves, each having his own treatment method of correction of compensatory or adaptative curves. Seemingly, none knew Chiropractic difference between cause and effect, vertebral subluxation and adjustment, and spinal manipulation and treatment of abnormal curves. That method which has created greatest stir, lasted longest, and has upset more Chiropractors' minds, is "Basic Technique", which in principle and practice, when understood, is adaptative tilting of pelvis, with seeming shortening of one leg or other. It follows naturally that leg follows tilt of pelvis; pelvis follows adaptative curves of spinal column; and

curves of spine follow wedge-side-slip of atlas with head tilted to one side or other, unbalancing equilibrium.

Chiropractic premises vertebral subluxation as THE CAUSE. As a result of atlas side-slip wedge, adaptative curves. As a result of subluxation, muscles on one side become taut or permanently contracted; on other side, relaxed or permanently prolapsed. Permanent cure is to adjust vertebral subluxation of atlas as cause. This was lost sight of by these investigators. They were anxious to correct gross observation of effects.

"Basic Technique" works from other end. It builds up short leg by placing a "lift" under heel. This raises short leg, levels pelvis, throws back into apparently normal "adaptative curves" and artificially levels head — BUT ATLAS VERTEBRAL SUBLUXATION STILL EXISTS in ITS original subluxated position in new artificial relation with occiput and axis. Given time, we form a secondary NEW SERIES OF ADAPTATIVE CURVES, compensating to "lift" of heel as artificially placed under short leg. As means of TREATING EFFECTS it IS effective. It does, for the moment, compensate for primary adaptative curves by creating NEW secondary adaptative curves.

IF objective is to "lengthen" "short" leg, lower high pelvis, pull adaptative spinal curves out to straighten and thereby lengthen spinal column, then BEST method we know is and always has been an osteopathic treatment, viz., place foot of "short" leg over and above knee of "long" leg (patient lying prone on back), press down to table knee of "short" leg, pulling leg downwards towards inferior. This pulls leg, pulls high pelvis, pulls out curves of spine, creates a tremendous fulcrum of leg on entire back. Then suddenly straighten leg jerking it from bent position to straight one. Osteopaths, even with A. T. Still, have always used this to straighten spinal columns and lengthen shorter leg. It may be necessary to push down knee to table and towards inferior, several times at each treatment, but eventually "short" leg will be temporarily as long as "long" one, and adaptative curves WILL BE PULLED back towards median line. WHILE IT WORKS, it is NOT permanent and must be more or less frequently resorted to, to keep it so, because ATLAS SUBLUXATION still exists as cause.

We here could have theoretically treated upper end by placing a shoulder brace under low side of head, push and brace support it superior artificially, level tilting of head, as result of which spinal column would have artificially adaptatively changed curves below, including leveling of pelvis and lengthening of leg. If our objective had been same as those who propose orthopedic surgery spinal treatment, that is what we COULD have done. It would have been

as effective as what they did, if not more so, because it is more directly applied at location of cause.

It is old work for medical men to have studied, researched problem of spinal curves and their treatment correction. Books on orthopedic surgery abound with their methods. (See THE CHIROPRACTOR'S ADJUSTER—D. D. Palmer, 1910, pages 177-178, 189, 220, 651, 786, 844, etc.).

Medical Men Treat Spines Also

Dr. Sayre's suspension device or "jury-mast" hung patient from ceiling, raising toes from floor, permitting gravity weight of body to pull out abnormal curves. That Chiropractors have played with principles and practices of spinal orthopedic surgery is not new. Dan Reisland, a Chiropractor, at one time had our profession agog with his invention of a "traction couch"—a table on which patient lay, back down, head and shoulders fastened with straps to one end, feet strapped to other, both being connected with pulleys pulling in opposite directions with ratchet wheel within handy reach of patient who could exert any pull on spinal column he could pleasantly tolerate. To increase stretchability, doctor had light-heat in table under body, which relaxed muscles, ligaments, cartilages, intervertebral discs, increasing value of pull. No doubt patient felt better. Before-and-after X-ray spinographs with Sayre's jury-mast or Reisland's backbone-heating, tension-stretching, or with Hurley-Saunders "lift" on heels, *will* show immediate temporary differences in adaptative or compensatory curves. The question is not whether or not any or all of these force changes in spinal contours, but HOW they were brought about.

We are of opinion, altho not so proven in laboratory tests, that average case could go to turkish bath, get sweat in steam room, get rub-down, and X-ray pictures taken before and after would show difference in relaxation of muscles, ligaments, cartilages, and consequent lengthening of spine as curves straightened out. Are these temporary expedients to a hopeful outlook by Chiropractor for his case who does not discriminate between adjusting cause LETTING INNATE MAKE NATURAL CORRECTIONS; or are they treatment of effects, forcing changes, with nothing new in principle or practice than what has been in use for centuries by medical men or orthopedists? These are questions which, sooner or later, our profession must answer.

Every group which tried various medical methods, each in turn found they failed. Older exponents of basic technique are acknowledging what others have stated before them in its use. Some people learn by cutting and fitting medical treatments, trying and failing;

others learn by clear-line thinking the Chiropractic principle and practice thru to logical facts.

Chiropractors unable to correctly and fully understand or practice accurate, competent, and efficient Chiropractic, desire easy substitutes. They seek "something new", "something better", "something different." Where there is a professional demand, there is a professional supply. The encompassing, complete, all-enveloping eureka is announced, minds of like inabilities accept, it is proclaimed by salesmen and buyers as ne plus ultra and sings its song thru the profession.

What's wrong? Many scratch superficialities of Chiropractic, therefore know how "limited" its principle is, therefore how "unlimited" its practice is. Few know anything about orthopedic surgery. Some Chiropractors have the "broad", "liberal", and "progressive" concept that if a method has anything to do in any way with back-bone territory including muscles, ligaments, cartilages, etc., it comes within the purview of Chiropractic on the theory that "medical men know nothing about backs" and the only people "who have ever studied backs are Chiropractors." The "play on words" of "subluxation" vs. "pathologies"; "treatment" vs. "adjustment"; "stimulation and inhibition" vs. "restoration" means little and they are used alike as means to his financial practice. To some, Chiropractic has a reputation to which they attach themselves like barnacles to go from poverty to riches; meanwhile use everything from heels to heads, so long as it affects backs as legitimate prey to sell, buy and sell to sick as Chiropractic.

Is B.T. Orthopedic Surgery?

What is orthopedic surgery? What ground and territory does it cover and serve? What are its principles and practices? What are methods used? Is it Chiropractic? Is it different? If there is a difference, is it slight or much? Are Chiropractic and orthopedic surgery allied or dissimilar? Are they enough apart to be antipodal to each other? Can a Chiropractor practice both and be or not be a Chiropractor? Can he practice both AND BE a Chiropractor and orthopedic surgeon?

Some Chiropractors think of orthopedic SURGERY as involving anesthetics, cutting, and breaking bones. The largest portion of orthopedic surgery has always been, and is today, manual manipulation and mechanical external treatment — but always directed to THE TREATMENT OF EFFECTS. Orthopedic surgery has NEVER involved VERTEBRAL SUBLUXATION OR ITS ADJUSTMENT BY HAND ONLY as specific cause of ALL disease in vertebral columns, backs, etc. Orthopedic surgery was one

of THE most important subjects which D. D. Palmer wrote most about in THE CHIROPRACTOR'S ADJUSTER. If our profession knew orthopedic surgery as D. D. Palmer, or as any orthopedist, they would buy less that is pawned as Chiropractic. Average salesman is sincere and offers wares in innocence. Average buyer is more sincere and more ignorant than average salesman. He who offered it as Chiropractic would know it WAS orthopedic surgery; and he who would nibble would know what he was playing with.

"Spinal balance", "general vertebral mechanical correction," "basic technique" with heel lifting and pelvis raising, are old principles and practices of orthopedic surgery. Orthopedic surgery is private medical domain of medical principles of orthopedic treatments of pathological effects; in any manner, means, methods, or practices, taking in and including all back and backbone territory.

Medical men have NOT overlooked the back, backbone conditions or treatments. They approach same problems and solutions with same ordinary education and understanding that many of our "broad" "liberal" and "progressive" Chiropractors have, viz., certain effects are known, means are established of HOW to *treat* them with an idea of relieving and palliating them to make case feel better. That salesmen who sell, and Chiropractors who buy, do not know these NEW "chiropractic" methods are OLD orthopedic surgery, does not change facts.

Basic Technique is a therapeutical method. Similar to others, it treats effects. It consists largely of: (1) blocking afferent flow of impressions to suppress or kill pain; (2) an orthopedic method of lifting low heels to level off short legs to straighten spinal curves. Best and worst that can be said for both is that they both work and DO both, the DOING OF WHICH seemingly "proves" to average superficial Chiropractor they accomplish Chiropractic objectives. Opposite is actually true; they deny Chiropractic objectives and prove medical orthopedic objectives.

Coming of salesmen offering "something better than" Chiropractic is not new. D. D. Palmer wrote extensively against those which developed in HIS day. We have written extensively against those developing in OUR day. To prove they were NOT Chiropractic, D. D. Palmer quoted orthopedic surgery works to prove THEY WERE orthopedic surgery. How many Chiropractors are interested enough in Chiropractic to read his works?

Dozens of methods and practices sprung on our profession 40, 30, 20, 10 years ago, TODAY are orthopedic surgery principles and practices. An orthopedist looks at "Chiropractic" of many "chiro-

practors" realizing plagiarism and recognizing his own methods. Why isn't this better known? Because average Chiropractor skims surface of Chiropractic; he knows NOTHING of orthopedic surgery or territory it covers. We commend the CHIROPRACTIC LIBRARY Volume IV. In it you find MANY articles on this subject as gleaned from largest and finest medical library on surgical orthopedic works in the world. After a careful study of those, you can judge accuracy of these statements.

Constant on Feeling. Variable on "Pain."

There is a constant on sensation. People who have NO sensation are those with NORMAL feeling and those with NO feeling. Healthy organs have normal feeling and normal feeling has no sensation. We do not know we have an organ when healthy, for it is balanced in cycles. When there is NO feeling, we have NO sensation, for cycles are completely unbalanced. Recovery of feeling is transition between pathological no-feeling of 0 in climb back to normal no-feeling of 100 per cent. Recovery of feeling anywhere between is noted by pain in ratio as it climbs from 0 to 100 per cent. Innate *must have* pain as sensation recovering from pathology to know afferently what to do efferently. Pain is a mental interpretation of an abnormal external physical condition. Pain is in mind in brain. Without pain, Innate has no way of knowing what to do at peripheral end of efferent nerve. Pain is proof of understanding between what is not and what should be. To kill pain, by morphine, aspirin, or any drugless method, is to kill necessary condition which helps Innate know what, how, and where to do things necessary to restore health. If there were no pain, there could be no recovery of health. Pain is a necessary internal pathological variable to reach and restore internal constant of health.

If Innate did not receive impressions from body, she would not know what was going on, neither could she build adaptative responses. When man is healthy and all is well, Innate must have impressions to know, to adopt, and adapt. The road to recovery is pain. Innate must interpret them to know how to reconstruct function back to normal.

Crossing legs is an example. Nerves are squeezed under one knee and over other. Legs "go to sleep" reducing feeling to 0. There is little "pain" in process of going from 100 per cent feeling to 0. Uncross legs, feeling begins to be restored. It climbs between 0 and 100 per cent, passes thru process from 0 no-feeling to 100 per cent; from no flow to 100 per cent. Process is pain, shooting needles, etc. To stop pain would stop a normal process of restored function in muscles.

Chiropractors must discriminate between "pain" on declining side between constant of health and coming of variables from disease, pathology, traumas, etc.; and restoration of feeling on constructive side on inclining side, passing out of variables back into constant of health. So far as patient is concerned, "pain is pain" and he doesn't want it. So far as average Chiropractor is concerned, "pain" is something patient wants to get rid of. As disease grows, patient gets worse, feeling diminishes. He gets an adjustment, disease ungrows, feeling is being restored, a new kind of "pain" begins and grows in ratio until it passes half-way mark in its climb. Patient is quick to complain he is "getting worse", wants to quit, wants to "take something to stop pain," etc. If man could externally strangle flow of internal EFFERENT impulses, between brain and body of another, that would be slow murder. That is what happens when vertebra is subluxated. In healthy man we have healthy AFFERENT impressions with healthy feeling. To slowly strangle AFFERENT flow, if possible, would be murder to sensation. In sick man, we have sick impressions with "pain" feeling. To slowly strangle those impressions is to prevent restoration to that extent. Physicians give morphine and sedatives for that purpose.

Modern surgical anesthesia is done chemically. Imagine how impossible it would be to perform modern surgical operations, delicate, painful, taking long time, without chloroform or ether anesthesia. What IS actual action of chloroform or ether? It "blocks" afferent impression nerve energy flow between tissue cell and brain cell. Local anesthesia has same result. Today, injections take place into various levels in spinal cord to anesthetize below point of injection. What IS action? It "blocks" afferent impression nerve energy flow between tissue cell below and brain cell above, back to brain. That IS why it is done. Cocaine or novocaine does same, in and around teeth. There are other methods also, viz., manual or digital anesthesia whereby massage or manipulation around nerves temporarily accomplishes same objective, viz., it "blocks" afferent impression nerve energy flow between tissue cell below to brain cell above. To "kill pain" is to "block" afferent flow for time being. BT does same thing, accomplishing same objective.

It is interesting to note following news item flashed over United Press March 23, 1938, bearing on this subject:

"Toronto, Ont., March 23 — UP — Dr. Alfred W. Adson, Senior Brain Surgeon of the Mayo Foundation Graduate School, Rochester, Minn., announced today the discovery of a new method of eliminating pain. He was scheduled to discuss the research findings more fully at the sectional convention of American College of Surgeons later today.

"By severance of the sensory component of nerves between the centers of pain and brain, or by injection of chemicals into sensory nerves, all sense of

pain can be eliminated,' Dr. Adson said. He said the operation consisted of 'Separating the sensory components of nerves and destroying them or making them insensible, without affecting the rest of the nerve.' The new method, he said, enables the killing of the 'feeling' processes of a nerve without destroying its other activities."

Is a Chiropractor any less when he attempts same by any other artificial or external route? To "stop pain" slowly or instantly is to "block" afferent transmission, to prevent sensation getting thru, to paralyze feeling. How it may be done doesn't matter, whether it be basephine or morphine, thumb or needle. Rather than lose patient, average Chiropractor is interested in anything to "stop pain." To "kill pain" when on upgrade would stop NCM readings, stop case getting well, and in The B. J. Palmer Chiropractic Clinic, would stop our service. To "stop" restoration of returning feeling is to stop life flowing afferently, making it impossible to continue efficient, competent, accurate health service. If patient wants to practice variables, he can do so better at home than with us.

Recall simple functional cycle. Afferent impression is equivalent to efferent function. 100 per cent flows from brain. 25 per cent is cut off by subluxation. 75 per cent gets thru to periphery. 75 per cent of function is present, 25 per cent is absent. Impression is 75 per cent feeling, 25 per cent no feeling which travels to brain. There mind interprets it 75 per cent normal feeling, 25 per cent pain. 25 per cent is what tells Innate what to do. Kill 25 per cent pain and you kill 25 per cent recovery of case. So long as function is below "norm", pain is a necessity. Kill pain at periphery of efferent nerve and you kill ability of Innate to get case well. No wonder Chiropractors fail to get cases well because they do not know the constant and because of groping and playing with contrary variables. They suppress pain rather than permit pain until normal function has been restored, permitting Innate to establish the constant.

Is it or is it not essential, necessary, or vital that Innate Intelligence KNOW what is going on in tissue cell to build Intellectual Adaptation to meet and care for exigencies at tissue cell? Suppose iron is hot and you touch it. What happens? Impressions are picked up; travel AFFERENTLY to brain; mind interprets them; impulses are sent down EFFERENTLY; responsive action occurs; finger is jerked from hot iron. How could Innate have done this WITHOUT knowing? Suppose you ate a bad oyster. How could Innate expel it from stomach unless she interpreted impressions coming from stomach via afferent fibres? We admit necessity of Innate receiving, interpreting, and KNOWING these things in NORMAL conditions. Is it reasonable or unreasonable to assume

that Innate needs know MORE what is going on with ABNORMAL conditions so she can adapt efferent flows to necessities of afferent knowledge of dis-ease? How CAN SHE KNOW except as mind interprets impressions received as they flow AFFERENTLY FROM tissue cell TO brain? Can Innate know 100 per cent of what she needs know, if afferent flow IS REDUCED? Suppose a case has tic douloureux, an efferent abnormal function, which occasions "PAIN" flowing from tissue cell to brain. Suppose morphine is injected and "pain" is no longer felt. WHAT subsided "pain"? "Morphine" does not stop "pain", but morphine as a chemical compound CAN and DOES BLOCK afferent flow of impressions from tissue cell TO brain; reduces flow of impressions from tissue cell to brain; reduces sense of normal feeling. Reduced sense of normal feeling is equivalent to increased sense of "pain" in exact reverse ratio. If there ARE subnormal quantities of impressions afferently from tissue cell TO BRAIN cell, how is Innate TO KNOW what to do, how to do it, or how much to do? Is it good policy, or bad policy, to BLOCK afferent impressions, assuming they can be blocked by this or that injection or treatment? Admitting that Innate MUST know, what matters it wheher afferent "blocking" be done by chemical, digital manipulation, compression upon nerves or other thermal, mechanical therapeutical treatment?

Are these methods dangerous, harmful? Morphine "to kill pain" is not harmful except that desire "to kill pain" day after day demands that case HAVE morphine day after day "to kill pain" day after day. This develops "morphine habit" where morphine becomes a necessity. Continued use of morphine deadens and benumbs sense of feeling, growing mental stupefaction exists, clarity and sharpness of intellect gradually fade, etc. Same is true of any method which "blocks" out sense of feeling. Whether they are dangerous or harmful depends upon what you need have to exist or live with, for there IS a marked difference between sick people WHO EXIST and healthy people WHO LIVE. A man has neuritis in his arm. He wants to get rid "of the pain." It is simple "to block off" afferent transmission. Now he has no pain. That was what he WANTED TO GET RID OF. In addition to "getting rid of pain," he has benumbed and stupefied his keen sense of feeling. If he is willing to pay THAT price "to get rid of pain" then that is what he has done.

"Blocking Pain" Is Medical

IF objective is to "block" pain, here is a simple but practical method. It needs no specially trained practitioner, no special table

upon which to lie, no special course in education. Find a *tender* spot between apex of sacrum, on either side, between it and pelvis, stridulate this spot lightly, "with strength sufficient to crush a gooseberry" until ALL "tenderness" is gone. This can be done walking, standing up, lying down, in theater, or at home. Absence of tenderness proves you have thoroly "blocked" feeling. Continue this process, day after day, and it will be but a question of time until Innate will not know what to do or how much of it to do, at periphery of efferent nerves. As a result, muscles will PROLAPSE. ONLY function is contraction. When muscles are contracted it is presence of an adaptation to reduced function. When Innate cannot adapt, contracted muscles will prolapse. After contracted muscles HAVE prolapsed, then curves pathologically existing artificially establish equilibrium and curves that existed before are now gone. They will not be permanently gone because atlas subluxation still exists as their cause.

Primary principle of Chiropractic is that a vertebral subluxation reduces quantity flow of energy which slows up tissue cell action which produces dis-ease. Fundamental behind Chiropractic is TO RELEASE imprisoned impulse; RESTORE flow, INCREASE reduced quantity, increase tissue cell action, to rebuild health. How much Chiropractic would it be IF you increase subluxation, make pressure worse, further reduce flow of energy, and make dis-ease worse? How much is it applying Chiropractic to do on afferent nerve of cycle what an increased subluxation would and does do on efferent nerve of cycle, viz., REDUCE quantity flow? Suppose it were possible to INCREASE subluxation, it would REDUCE quantity flow and make dis-ease worse. Would any Chiropractor take pride in claiming to be able to inject morphine to block; thereby REDUCING efferent flow? Why should ANY Chiropractor pride himself on BLOCKING efferent OR afferent flow between tissue cell and brain cell? Dis-ease is brot about by DEcreased flow on EFferent side. Lack of normal feeling, or pain feeling, is brot about by DEcreased flow on AFferent side. Health is brought about by an INcrease on BOTH sides. We know "chiropractors" who practice a PRINCIPLE of INcreasing on efferent side and a theory of DEcreasing on afferent side simultaneously. Chiropractic rests on principle and practice of INcreasing on BOTH sides.

Pain is mental interpretation, at epipheral end of afferent nerve of necessities at peripheral end of efferent nerve. Pain is mental understanding of physical requirements in pathway of cycle of energy. Pain is Innate's mental comprehension of physical lacking function at tissue cell.

It is necessary, essential, and vital that Innate get impressions,

whether normal OR pain, to interpret and be able to know needs and necessities of physical requirements of function at tissue cell.

It is easy to ease, deaden or kill pain. It is done medically with drugs given many ways. It is done by drugless practitioners many ways. Our father had the most practical, simplest, quickest, and most positive method of "killing pain" anywhere within the body, we have ever known or seen used. We know it. We never use it. We refuse to be a party to "killing pain" in cases that are on the climb. The laborious and tedious thing is to restore feeling and get Chiropractors to understand that constant. We have consistently labored to RESTORE sensation from below normal up to normal feeling which is no-feeling. We know case wants "to get rid of pain", but there are other things more important, viz., restoration of normal 100 per cent feeling function. Health cannot be restored without going thru process of pain. Any Chiropractor who persists in "killing pain", no matter how, makes it impossible for Innate to know how to get that case well. No wonder Chiropractors grope for constant, have it, and spend money to kick it out of commission.

Cases and physicians have been trained to think, believe in, use, and treat declining pain variables. When getting sick or getting well, they think all are same declining variables. Cases and physicians are not trained to think constants, so neither think of necessity of restoration of feeling inclining pain. When cases go to Chiropractor, they expect variable treatments stopping pain, and can't understand why he prefers constants with pain. Path of least resistance is for Chiropractor to agree and practice variables. "If they want pain killed, kill it." Medical men did not get them well with pain-killing variables, neither can Chiropractor. Only judicious use of a constant can. In The B. J. Palmer Chiropractic Clinic we deny variables and affirm constants.

Average Chiropractor, notwithstanding his education, is like average physician — quick to find what case wants and endeavor to gratify it. Because average Chiropractor plays with variables which ease pain, patient's recovery is delayed, prolonged, and perhaps he never does get well. He is relieved. Physicians do as much.

With two methods here described of "blocking" pain and using osteopathic move of stretching spinal columns, you have at your command everything that so-called "basic" technique has to offer. It is something ANYBODY can do, at home, on members of their own family without calling a doctor and paying him a fee for doing. It is JUST that simple! Patients come to The B. J. Palmer Chiropractic Clinic to get well. To get well requires whatever pain is necessary by Innate going thru process of recovery. Nobody

here will do one thing to suppress, deaden, or kill necessary recovery pain. We permit Innate to know pain to get case well.

On question of "Pain," Adrian says:

"This question of *central summation* of impulses will come up later in connection with pain; it is introduced here because it shows *that a rapidly adapting sense organ may go hand in hand with a rapid decline in central activity after each impulse*, but it has to be admitted that the association is not universal."

"There is one problem of the sensory mechanism which has a medical as well as a physiological interest. We have come to realize nowadays that, *although pain may be a valuable danger signal ******."

"On the whole then it is unlikely that pain is always due to specific pain fibres. It may be nearer the mark to say that *the sensation produced by nerve fibres of a given type becomes a closer and closer approach to pure pain in proportion to the slowness of conduction of the fibre and the lack of sensitivity in the end organ*."

"Both touch and pain are evoked by messages which are made up of brief impulses which cannot vary in size; thus *the intensity of the effect must depend on a summation of the changes caused by each impulse*. Is it not likely then that the different character of the sensations of touch and pain may depend partly at least on a difference in the amount of summation which can occur in the two pathways?"

("Mechanism of Nervous Action," by E. D. Adrian)

Theories vs. facts. How easy to believe theories, how hard to research TO KNOW FACTS. Theories are taken for face value, sight unproven. TO KNOW FACTS takes nothing for granted, puts all thru acid tests, makes itself work before stated. Majority of our profession have been taught, believe, and practice theories. Salesmen prattle new theories. As others offer theories, so have we offered 100 to their 1. In earlier years in Chiropractic, it was all theories. In later years Chiropractic is scientific. This reversal was not brot about quickly in us, nor will it be in the profession. Transitions are slow. It necessitates one person to lead, one place to prove scientific transformation. That we were once accepted source of theories and are now accepted source of science, makes us more able to contrast and differentiate relative comparative values. Having lived long in land of theories, we recognize them and their fallacies which force us now to better recognize need for science. It takes a magician to see tricks of magic. Just so does it take a theorist to see fallacies of theory. Perhaps that is best reason for complete reversal of policy in research in our Clinic.

No matter how true principle or effective the practice of specific atlas side-slip wedge vertebral adjustment would be in permitting NATURAL correction of adaptative or compensatory curves, IF Chiropractor could not give a competent, accurate, and efficient adjustment, then results would not and could not be attained in

his cases. He justifies his alibi in proclaiming specific principle in error and specific practice defective of results. Same principle and practice, in hands of one equipped to ascertain facts and competent, accurate, and efficient in adjustment, would and could secure results desired. The failing Chiropractor as well as patient naturally seeks strange fields, greener pastures, methods easy to give, even tho treatment were less effective than adjustment. To such failures, specific adjustment of cause would be wrong and "lift" heel treatment of curves would be right.

We herewith quote, at random, certain sections of notes taken in a class in "Basic Technique." It merely acts as a substantiation that work is as stated and is in accord with claims made:

"How to *break up* ankylosis.

"How long will it take? From 1-10-20 days.

"How to break up. 1. Adjusting. 2. Heel lift.

"*Caution.* Make haste slowly in using lift. Begin with not more than 40 per cent of leg deficiency. Preferably begin by a lift of $\frac{1}{8}$ ". *Have patient walk in vigorous manner for several miles; return next day. Try adjusting again.* If not yet sufficient, try another small lift ($\frac{1}{8}$ " or $\frac{1}{16}$ ", not over $\frac{1}{4}$ "). *Continue until ankylosis is broken up.* This will correct ankylosis of sacro-iliac and the vertebral column also removing strain will remove necessity of ankylosis."

"1. Details of use of lifts: In sacro-iliac ankylosis, *if proper adjustment does not remove pain*, etc., then ankylosis at S.I. is evident. Put lift under side of ankylosis. Have patient walk three to six miles and return to office next day. *Try adjusting.* If no results, add more lift and repeat walking. If necessary continue lifting and walking until adjusting is effective. *Use shot gun contact in ankylosis S.I.*"

"Thoracic ankylosis, and effects on weight changes.

"The ankylosed area moves as a unit or as if one long bone due to the fixation of the vertebrae below. You move the ankylosed areas as a whole to one side or the other. This will be manifested in symptomatic effects, or unusual weight effects or both. *Close attention must be given in order to know when this occurs.* Some effect great soreness and pain thru shoulders and neck, even fever, and confinement to bed. Weight changes may be abrupt, too great to either side or will not change at all. Lifts should never be used with the idea of breaking down thoracic ankylosis. You may use them, however, to help overcome any adverse symptoms of a too sudden change in that area before ankylosis is overcome. Example: Supposing adjustment was being used on left side with 2nd lumbar as base to be leveled (always remembering you are straightening the spine, above the foundation of the lowest freely movable vertebra). As you level this foundation the vertebrae above (being ankylosed) are trying, as a unit, to move toward normal. We will assume a right curve is present. This will result in a marked shifting of the whole area to the left, causing acute subluxation at either end of ankylosis and marked strain on attached muscles. Also a probable marked shifting of weight back to the high side or no weight change at all after the adjustment. In order to correct this effect an adjustment may be given on opposite side of contact in effort to raise the foundation side you had been lowering, in order to allow the ankylosed area to shift back and relieve the acute strain on muscles and acute

vertebral relationship. If the adjustment does not relieve condition place a lift under foot (probably of opposite side of adj. contact you are using when change occurs) in an effort to bring the ankylosed area back closer to its former relationship. From then on, proceeding carefully, the column below will have to be maintained in such relationship as to gradually relieve the strain on ankylosed part. Thus removing any necessity for the continuance of ankylosis and gradually allowing it to be broken down by *nature* and the calcareous material is carried away by the blood stream."

"2. Sacro-Iliac Ankylosis: place $\frac{1}{4}$ " lift under ankylosed side, instruct patient to walk vigorously 3 to 6 miles, return next day to office. *If ankylosis is not broken add $\frac{1}{8}$ " or $\frac{1}{4}$ " lift more, instruct patient to walk again and return next day. Continue this until ankylosis is broken up. Warn patient of expected reactions.*"

"When a disrelationship occurs in which the foundation of the body is lowered. This lowering withdraws the support on that side. As the body maintains its upright posture at the expense of the resulting curves the excess weight is forced down the higher supporting side. Exceptions to that are a result of thoracic ankylosis and exaggerated lumbar curve. The low foundation side of body is determined by rotation of lowest freely movable vertebra above 5th lumbar."

X-ray films exposed, developed, and interpreted, taken under and with precision technique, permitting exacting duplication from which accurate overlapping graphs were made, prove that average atlas is subluxated somewhere between a minimum of $\frac{1}{8}$ " from normal up to $\frac{3}{8}$ ", altho some have been more than that. These are measurement figures, not guessed at. Compensatory curves take place from that point thruout entire length of spinal column, unbalancing it more farther removed from its cause, in compensatory degrees, until you reach center of distance length of column; from there on it compensates reversed in correcting unbalance to extent that there is an average of $\frac{1}{8}$ " up to $\frac{3}{8}$ " shortening of one leg. Question arises, shall we ADJUST VERTEBRAL SUBLUXATION CAUSE, ATLAS SIDE-SLIP WEDGE, or shall we treat shorter leg effect? Assuming both could arrive at same point, in correction, which would have permanent value and which temporary?

Why Include SPECIFIC with BT?

In earlier days of "Basic Technique," as taught, some claimed it a cure-all. Now they advocate and teach (on the road and in school) advisability of adjusting specific atlas subluxation IN ADDITION to what they do by way of treating effects from lower end. If Basic Technique is a CAUSE corrector, WHY specific? If specific is a CAUSE corrector, it needs no substitution with treatment of effects. With this "lift" of heel idea, there came another. Patient was laid face-down on table, hips raised VERY high with padded pillows so that if you viewed him from side, you would see torso

low, buttocks HIGH in air, and legs hanging low again. All this had another effective treatment posterior on curves, more particularly lordoses and kyphoses. With these two methods of treating curves, there was pushing of thumb into certain places in buttocks region near sacrum, then cross fibre manipulations on tender spinal spots above, until such time as pain disappeared, etc. (We here have not covered all detail or much BT technic. We did not discuss wedge or pathological lumbar vertebrae or other pathological conditions in pelvis. We are not concerned in elaboration of methods when entire system is based upon same working principle. To discuss working principle, regardless of how it applies, is to reach same conclusion in each detail or technic enumerated).

Much was claimed for this. At first this was said to be THE real treatment — all else was secondary. Value of thumb pressure idea IS "secret" of its pain sales value, but it isn't "secret" of its treatment value. The "lift" of heel and "lift" of pelvis are. Whatever treatment value accrues, if any, is in changes that occur after heel has been lifted or changes that occur following lifting high of buttocks region, and "adaptative curves" temporarily straighten out as a result of either treatment.

That such "system" of forced rapid artificial methods, even to breaking ankyloses, DOES change spinal contours, does put strains on relaxed muscles and does relax strained muscles; that it creates a change; that change of posture tending to reverse direction of adaptative or compensatory curves does relieve; that such relief is soothing and pleasant to case, are granted. In what way, tho, does any of this differ from any other palliative orthopedic treatment medical method for any disease? To scratch erysipelas is to relieve itch; to take soda is to relieve hyperacidity; to take epsom salts is to relieve constipation — but none of them CURE.

BT Yourself

Find TENDER spot, stridulate and manipulate it until tenderness is gone. This temporarily "blocks" afferent flow. To "block" afferent flow is to stop circuit, produce prolapsis of muscles which is absence of function, which is contraction. Basephine, same as morphine, produces absence of pain which is absence of feeling. Suppose you had cramp in stomach — is the way to cure it to force it into a prolapsis by "blocking" impulses, causing it to prolapse? Is prolapsis curing contractures? It is better to RESTORE normal muscular contractions.

We are NOT interested in ABSENCE of function any more than we are in ABSENCE of feeling. We ARE vitally interested

in PRESENCE of function, PRESENCE of feeling; in RESTORING normal function AND feeling.

We ask no secrecy on this solution of presentation.

We know above statements are sound because we now have a way of proving restoration OR blocking nerve flow, efferent OR afferent.

To arrive at specific corrective conclusions, by research and proof, was and is a simple matter. We took various cases with varying degrees of adaptative or compensatory curves. First, we took full-length, single-exposure, standing erect, NORMAL, as such a person would stand. Second, we took same person, same posture constant, put "lift" under LOW heel. Took another exposure. Third, we took same person, same posture constant, put "lift" under HIGH heel. Took another exposure. We took all three to graph laboratory, made a graph. Meanwhile, no thumb-butt technique was used. We went further. We laid cases prone, with and without raised high hip pads, and took exposures both ways. That also changed curves, no thumb-butt technique being used. What do these sets show? That curves ARE adaptative or compensatory and can be changed by and with posture. That to "lift" left heel is to reverse adaptative or compensatory curves to adapt and compensate on themselves in reverse directions and dimensions; left curve becomes right, right becomes left, and so on throughout length of spinal column. Taking same sets of spinographs, horizontal lines were drawn across pelvis levels of all three of a set. Perpendicular lines were drawn at RIGHT ANGLES to these, letting them go superior where they would. A graph was made of three lines. One went left, other went right of natural normal which was in center. This proves that "lift" of heel does throw body off equilibrium; that by "lifting" heel you shift contraction and relaxation of back muscles from one side to other. Has any of this ADJUSTED THE CAUSE OF DISEASE — that question which is distinctly CHIROPRACTIC?

Given time, muscles adapt and compensate on themselves; abnormal contracted muscles relax, and abnormal prolapsed muscles contract. All is well until TIME takes its toll — with atlas side-slip wedge subluxation CAUSE still existing, NEW abnormal compensatory and adaptative curves appear and so age-old story repeats itself — like cause, like effect. Now what? CAUSE NEEDS ADJUSTMENT! Chiropractors who have risked health and well-being of their cases to this orthopedic surgery experiment are realizing this IS what is happening in practices. Chiropractic now comes into its own again, UNTIL ANOTHER MYSTERY arises. Is there anything new about this medical procedure? In what way

does it add to our store of previous Chiropractic knowledge? It is obvious that forced artificial treatment correction changes curves. So what? In this we find counter-parts in orthopedic surgery, in principle and practice.

Historically, there is nothing new in this theory of treatment of curvatures or compensatory curves of spine. It has been equally as well done by orthopedic surgery and, in our humble opinion, osteopaths had a more practical and quicker way to do same thing, accomplishing same objectives. Only difference is, osteopaths did not wrap up their method with mystery, secrecy, or shroud it to make it appear more than it really was.

Case has accident, concussion of forces produces atlas side-slip wedge subluxation cause of spinal vertebral pathology. Atlas being slipped up and off on one side, down and off other, head is tilted, spinal curves from there down are equilibrium adaptative and compensatory. For reasons better known to Innate Intelligence than to Educated Intelligence, thon sometimes builds exostosis and ankylosis on short or inside curve-side of lumbar region scoliosis.

Two or more vertebrae become exostosed and ankylosed. Our working principle of ankylosis being a normal adaptation to an abnormal condition is found in notes referred to, as follows:

"Ankylosis may occur between the sacrum and 5th lumbar or entire length of column. This is nature's method of protecting strained muscles and ligaments by depositing bony particles in the weak fibres."

In another place in the notes, we find:

"The process of ankylosis is due to nature's efforts to strengthen atonic muscles, ligaments, and cartilaginous tissue, by infiltration of bone and calcareous substance. It is to strengthen."

A surgeon would give chloroform, cut open structure, and break ankylosis ONCE in ONE day. "Basic" technique would put "lift" under low heel; "have patient walk THREE TO SIX MILES — if no results — REPEAT WALKING. If necessary — CONTINUE WALKING. Have patient walk in VIGOROUS manner. Continue UNTIL ANKYLOSIS IS BROKEN UP." Average person steps TWO feet. In ONE day, three miles, he will pound, hammer, strain, pull, tug, in reverse direction, ON THAT ANKYLOSIS, 7,920 times. SIX MILES in ONE day, 15,840 times. If 7,920 or 15,840 "VIGOROUS" hammer blows in ONE day are not enough, "add more lift," increasing pound of "vigorous" hammer blows, and "continue until ankylosis IS broken up."

Each blow, strain, tug, or pull is in REVERSE DIRECTION from that which Innate found necessary in adaptation to pathology, for exostosis and ankylosis are NORMAL ADAPTATIONS to

abnormal pathologies. A Chiropractor would adjust ATLAS SUB-LUXATION CAUSE of pathology, let Innate chemically dissolve normal adaptation exostosis when no longer needed, and thus chemically dissolve ankylosis. IF ankylosis is "nature's method of protecting" and "nature's efforts to strengthen," then it is sound for "nature" to break down and take away, and unsound for man to force its removal.

What happens with "basic technique" in cases that CANNOT walk — such as paralysis, anemia, tuberculosis, asthma, etc.? Why not clamp over ankylosis a trip hammer that would deliver 7,920 or 15,840 blows in ONE day? Evil results? Listen! "Close attention must be given in order to know when this ('symptomatic effects') occurs. Some effects great soreness and pain thru shoulders and neck, even fever, and confinement to bed. *** Warn patient of expected reactions."

Treatment of spinal curvatures, spinal curves, spinal pathologies including breaking of exostoses and ankyloses, is not new. It has been in use 400 years. Only difference, if it is a difference, is that medical men work upon curves directly, and basic technique works upon them indirectly — both tending to correction by treatment of effects methods. Suppose there is a lumbar scoliosis with short side of curve to its opposite, with osteomalacia, exostosis, and ankylosis. Pelvis is not level and one leg is short. Exostosis and ankylosis are adaptative and compensatory to pathological condition and its normal intellectual adaptation. Raise heel, raise pelvis, then send that patient out on a "walk in vigorous manner for several miles," and if that fails, raise "lift" still more and have him walk "three to six miles — next day." Do that and you CAN AND WILL BREAK ANY ANKYLOSIS! This is another way of using regular medical orthopedic surgery principle of flexion with tension designed to "break" ankylosis.

We know our profession absorbs these "new methods" spasms; we know some of our people get fearfully excited over them; we know salesmen make bombastic claims at first; we know practitioners' enthusiasm knows no bounds on first rebound — we also know time is a great leveler of truth and facts. From actions, it appears some people hold opinion they make water run up hill, reverse natural law, viz., they make mental impulses flow from butt to head. That "interference" (if there be such in "system" under investigation) meets resistance around sacrum somewhere, somehow. One moment's superficial reasoning refutes such a claim but it is that "moment's superficial reasoning" that takes a vacation when sold in mystery and secrecy. To be shown how to "lift" a heel and cause compensatory spinal curves to reverse compensatory direc-

tions, seems sufficient for many to think they have upset natural law.

We have talked with sincere men who studied and practiced "basic technique." We talked with them shortly after they took it; we talked with them months or years after they tried it. We find they agree with above analysis of this particular professional itch they scratched. Time has a peculiar way of raising that which stands up, and lowering that which falls down in achieving results in the sick.

Enthusiastic Beginners

As a sample of enthusiasm a beginner goes into, let me submit correspondence. We do not repeat this with any idea of belittling or embarrassing correspondent. He assumes a right and can exercise that assumption of studying and practicing anything he wants. One right, however, HE does NOT possess any more than we, viz., neither he nor we can change fundamental vertebral subluxation causative interference to mental impulse supply between brain and body principle and practice, concepts or precepts, basis or foundation of WHAT CHIROPRACTIC IS. If HE is incompetent in practicing CHIROPRACTIC, in adjusting vertebral subluxation, and feels need of bolstering orthopedic surgery methods, he can use them; BUT HE MUST NOT CALL THEM CHIROPRACTIC. We append correspondence:

"Dear B.J.:

"Several months ago, I was visited by Dr. Craven, at which time he discussed with me his experience with Basic Technique and Dr. Logan. I listened with courtesy, but of course I did not accept all of his statements at full value, even though I regarded him as a high grade conscientious fellow. After three interviews, by which time we had forgotten about everything except hard facts and demonstrable theories, I finally began to believe there was some real merit to Basic Technique. I still did not feel any great need for it as I thought I was pretty successful in my practice and I knew I had succeeded on cases where other supposedly good HIO and Meric men had failed to get results, *and I did not have any outstanding failures*, although some cases were very slow; on the other hand I did feel a need for something which would help me in acute emergency and bedfast cases where it was impossible to have X-rays.

"I finally decided to take the work for this special need, but still felt it was just another 'new move' or some 'old move' under a new name, even though it did seem to me as though there was a basic principle involved which was not covered in HIO.

"What an eye-opener I got in the first lesson. It really stunned me because I thought HIO was an all-inclusive system even if it was not entirely perfected. I had a prejudice against Basic Technique because of the nature of the technique itself and because HIO philosophy and art is a beautiful thing.

"You may wonder why I am writing to you thus, B.J., laying myself open to your criticism, which I know can be very sharp and subtle, etc., but I am not fearful of it as I feel that if you should understand my motives in writing you,

I can "take it", but I feel you will not misunderstand me and that you are big enough to read what comes from a sincere heart, with an open mind.

"B.J., I want you to know first that regardless of what you may say, I am still your loyal friend and a friend of PSC, and I have a respect and love for you and all that you have done for Chiropractic and for sick and suffering humanity, and I believe your name will go down in history as one of the greatest benefactors of the human race. I realize that relatively I am just a beginner writing to a master. I also realize something of the great many-sided problems you have on your hands, which is enough to bury a dozen ordinary men, and I realize that you still are the greatest leader in Chiropractic, but at the same time I also feel very strongly that some important things are happening these days and that sooner or later certain definite demonstrable truths are going to permeate and change the entire field of Chiropractic.

"In my humble way I desire to do all I can to help PSC and to maintain you as the leader of Chiropractic, but I do not think the way to do this is to 'yes' you, but rather to fearlessly accept and utilize all truths pertaining to Chiropractic. In fact I strive to seek truth above all other things even to the point of risking the friendship of some of my most highly esteemed Chiropractic friends.

"You may think (from second handed information) as I did, that Basic Technique is not Chiropractic, but I know from personal knowledge that it is Chiropractic and agrees with Chiropractic philosophy and that its practice involves only such art as has to do with straightening the spine, which in turn has to do with the removal of interference to the transmission of life over the nervous system.

"You may have heard, as I did previously, that removal of muscle strain was the big idea in Basic Technique. It is true that muscle strain has much to do with health and pain, but in Basic Technique it is the adjustment of the spine that accomplishes the removal of muscle strain and pain.

"The human body is a mechanism which depends upon a trinity of electrical, mechanical, and chemical activity. As I see it, HIO takes a full cognizance of the 'electrical' activity and the primary location of interference to the transmission of this 'electrical potential' to the body and the resultant mechanical and chemical activities which follow when there is or is not interference.

"Basic Technique accepts all of this HIO philosophy and art but it goes further and takes into consideration the operative law of gravity in the human body. When this principle is carefully and quantitatively analyzed, it is found that this is a tremendous factor, which *reacts* on the spinal column as a whole its related musculature and hence affects the atlas in relation to the axis and occiput and therefore affects the pressure on the spinal cord and spinal nerves.

"I previously thought that if the atlas was correctly adjusted that the proper supply of power could be transmitted to all muscles and ligaments and that consequently everything to be desired would be accomplished.

"In order to bring out more forcibly what I mean by the great importance of the law of gravity in the human body, let me illustrate as follows: if you were perfectly adjusted at atlas and there was no interference to the flow of mental impulses to any part of your body and it was necessary for you to support your arm in an extended horizontal position for a long time while you were in a standing position, you would soon realize that a tremendous amount of extra energy was needed to accomplish this activity and if this were to be done continuously, that Innate would be forced to make a number of important

adaptations to meet this abnormal demand for power and sustained muscular action. If sustained muscular strain is present in important muscles and ligaments, which support the spine, I know that your broad knowledge of the anatomy and physiology of the body tells you that many important things are going to happen to the body even though there may be no interference in the atlas region.

"I have good reasons for believing that crooked spines and resultant strained muscles do affect the atlas and thus cause interference to transmission and that in many cases such interference can be removed by proper adjustment of the sacrum. Thus it is possible to take advantage of the law of gravity rather than to have to combat it.

"When the atlas is adjusted directly, due to chronic spinal misalignment, the spine, including its foundation, is unable to return entirely to normal, thus imbalance and muscle strain remain and react against the normal position of the atlas.

"I have had some very interesting experiences in checking the atlas region with NCM before and after a Basic Technique adjustment. *I still believe that the NCM is a very important instrument in Chiropractic analysis and research and that HIO is a wonderful system*, but I also know that B.T., as far as my ability to practice both is concerned, is more potent in most cases and I have good reasons to believe spines can be straightened more quickly and more permanently by using B.T. or *B.T. plus HIO in certain cases*.

"I feel quite positive that B.T. adds to where HIO leaves off, in other words they fit together perfectly, and B.T. like HIO is a lifetime study and not just a new move or an old move dressed up with a new name.

"From a personal standpoint it is too bad that B.T. did not originate in PSC, but I feel we must take things as we find them in this world. On the other hand, I have found that Dr. Logan is a fine gentleman, honest and sincere, and absolutely fearless and a tireless worker for Chiropractic. He thinks in straight lines and is already a great power in Chiropractic. He does not desire leadership and has shunned all opportunities to play with the Chiropractic politicians, even though it has cost him much financial support and the enmity of a host of chiselers, who live on the credulity of a large percentage of the Chiropractic profession.

"You may be surprised to know some of the fine things he has said about you personally and that he is sincerely interested in the permanency of the PSC which he considers as important to ALL good Chiropractors because it has been universally recognized as the fountainhead of Chiropractic.

"I realize your position in relation to HIO work, but in spite of this I believe there is a possibility that you and Dr. Logan should be able to work together to the mutual advantage of each other and to increase in geometrical proportion the results of each other working separately. What a blow that would be for the illegitimate schools and what a blessing for real Chiropractic.

"Chiropractic needs both of you working together shoulder to shoulder to fight and conquer a common enemy which in terms of money and political power is many times our superior. Unless we unite our forces we may lose a battle in which you have more at stake in a multitude of ways than any of the rest of us.

"I know you have made many supreme personal sacrifices in the past in the interests of Chiropractic and Chiropractic truth and advancement and I believe you will do it again if you see the necessity of it.

"I also know that my knowledge and experience along these lines is very small in comparison to yours, but I am wondering if you are getting the true picture from the field. That is much more difficult for you to do because of your very eminence and 'separateness' or isolation from the field, if you get what I mean.

"When I started this letter I did not intend to go nearly as far as I have done, but it is with an honest and sincere motive that I have said what I have said. I realize I have not set forth my ideas regarding BT as clearly and comprehensively as I might after careful deliberation or if I could talk it over with you, but I feel sure you will be able to get what I have in mind. *****"

"Dear B.J.:

"Your recent letter was very much appreciated and I am very happy to know you are further interested in some plan of cooperation in the interest of Chiropractic and all good Chiropractors.

"I have nothing to sell you except an idea ('get the idea and all else follows'). My previous letter was written to you without the knowledge of any other person except my stenographer, therefore you may know that I have not discussed with anybody the possibilities of you and Dr. Logan cooperating with each other, or any basis for your getting together, therefore I am not yet in position to make any definite suggestions.

"I realize you and Dr. Logan may have a number of divergent ideas regarding means to an end, but I am sure both of you are striving for the same end in Chiropractic.

"Both of you have a specific scientific system of application both completely in accord with the philosophy of Chiropractic. Both of you are positive, aggressive fighters for pure Chiropractic and its rightful place in the world, technically and legally.

"Dr. Logan has between 1200 and 1500 good Chiropractors who are getting good results and can be depended upon in an organized way. Quite a few are also HIO men. BT is rapidly gaining momentum among the better Chiropractors in the field.

"If a friendly, cooperative feeling existed between you two leaders, I believe HIO and BT men in the field would pull together for certain common objectives instead of working in a divided and incoordinated manner as is now the case.

"I do not expect that you and Dr. Logan would be able to merge your respective schools and systems of technique at this time because I realize you have many organization problems which seem almost insurmountable for the present.

"I believe if you publicly recognized BT as a specific Chiropractic advancement in harmony with Chiropractic philosophy and not contradictory to HIO, and give credit to Dr. Logan for his wonderful work that you would gain many more real Chiropractic friends than you would ever lose.

"All good men admire and respect courage and fairness and they don't expect any one man, no matter how good he is to accomplish all the developments in the great field of Chiropractic. I believe Dr. Logan would publicly recognize HIO, including the NCM, as great scientific achievement and recognize you as the original developer and titular head of Chiropractic and do all he could to maintain the good name of PSC, as the Chiropractic fountainhead. Dr.

Logan does not care for public personal glory or leadership and I believe he would gladly support you along this line if he was assured that BT was kept clean and undefiled and out of the hands of chiselers and Chiropractic politicians who play the game for their own selfish gain at the expense of Chiropractic.

"I would be glad to approach Dr. Logan with any ideas you may have to suggest for a personal interview between you or any other plan you may have in mind. Perhaps Dr. Craven is the logical man to get you two fellows together as I know he has a profound respect for both of you and knows both of you very intimately. At any rate, you may depend upon me to do anything I can which will lead to a cooperative understanding between you and Dr. Logan. I feel sure that if each of you knew each other as I know each of you, you would find many more good reasons for cooperating than antagonizing and if the Palmer-Logan forces were joined in the field, all good Chiropractors would soon be fighting a common enemy instead of each other.

"I sincerely trust you get the big 'idea' which I have outlined so fragmentarily. If there are any specific questions you have in mind, do not hesitate to let me know. I shall hold in confidence anything you wish.

"Awaiting further word from you, I remain, as ever.

Our Answer to Both Letters

"Dear friend ———:

"I appreciate your lengthy and explanatory letter. It is appreciated. I know sincerity you express and desire me to know.

"Men who make their mark and accomplish ultimate objectives, are those who know where they want to go, build their road to go on, who can see and read passing signs on highway, watch out for gulleys, keep on paved road, and keep their heads by refusing to let passing things side-track them from getting to where they are headed. I have had hundreds of opportunities to detour — some better than those promised today. I am what I am today, and I stand in your estimation today, because I REFUSED TO DO YESTERDAY THINGS YOU SUGGEST I SHOULD DO NOW. It is nice to know you appreciate judgment used by me in past in being able to discard the useless. I wonder what the men of tomorrow will say about the same judgment exercised today? Had I detoured yesterday, I would have pleased the profession yesterday; just as if I detour now, I would please you now. Respect I earn from my friends is admirable. Upon what meat does this respect feed? Was it not a steadfastness that could not be changed by flattery or playing upon my human weaknesses? Was it in my ability to see thru vital weaknesses in the armour of wiles of salesman? Does not strength feed the strong; or do strong feed on weakness? It is that steadfastness to pursue that has builded my strength. For same reason I would not side-track yesterday, I cannot side-track today.

"Hundreds of men, like you, on hundreds of ideas in years past, were just as sincere and honest as you, believing then what you believe now, have tried to convince and sway me down thru the years. You say:

"'All that you have done for Chiropractic and for sick and suffering humanity.'

"'I believe your name will go down in history as one of the greatest benefactors of the human race.'

"'I realize that you still are the greatest leader in Chiropractic.'

"‘To maintain you as the leader of Chiropractic.’"

"Why? Because I dared to investigate ideas and hold fast to truth in them, if any. Accepting if it fit, discarding if it did not fit into the Chiropractic principle and practice is what makes for Chiropractic leadership. I could have agreed then, with many, as I could now agree with you. Suppose I had accepted every Tom, Dick, and Harry thing that came along, which other men believed in, and who thought because *they* did, I should. Would I now be in position they are. Each man is the maker of his destiny by way he shapes that destiny; by adherence to or denial of facts in every instance he is called upon to face.

"But let us hesitate and ask ourselves: Where are these many men with their many ideas of years past, who tried to sway my judgment? Where is THEIR 'leadership'? Our ranks have ALWAYS been filled with them, as they are NOW filled with them. That's why our ranks are filled with followers and why we possess few leaders. Look over rank and file; pick out its 'leaders'. How many do you point to? And those that you can — WHAT makes them where they are?

"What a drain upon society the thief, murderer, insane are. Not only do they take producers and make partial non-producers of them, but they drain income from producers to support them. Much that is given by sane to take care of insane; honest man must waste valuable time building pens for thief and murderer. I have work to do. I know what that work is. Any one life is short, and helpers few. If all my time and that could be devoted to construction, I might get my work done. But frequently I am compelled to stop work and play on some idea which many think variable; investigate it; find its relative place in scheme of things; and dole its solution out to unwilling minds who prefer not to listen. This takes time away from work, does me good because then I know, but does little if any good to him who prefers not to listen. However, no movement can be measured by the hour. It must be weighed by the century. Present hour is not important. Tomorrow is. In spite, however, of handicaps of time I believe wasted, I still have climbed scales of accomplishment and achieved no little distinction in your eyes. I wonder how that came about? What was the process of addition or elimination; subtraction or multiplication; simplicity or complexity used, which reached that pinnacle — if such it be? Could you explain it to me, for I really want to know.

"You need not fear my 'criticism, which I know can be very sharp and subtle, etc.' All you need fear is my truth of conditions, circumstances, etc. To break THAT down is difficult, hard, and oftentimes impossible.

"I am not unmindful of interest you have in the profession's welfare, in The PSC's welfare, as well as mine. For all this, you have my most grateful appreciation.

"That which prompts men to move is their understanding of an issue. No man but a fool would refuse to move when he knew it was to his better interests to move. No man would refuse to move upward, unless he be stubborn or his pride forbid. Nobody has yet called me a fool — stubborn, or unable to yield my pride to a bettering condition. I reversed myself so often, on so many subjects, that I couldn't have any 'pride of opinion' left if I wanted it. That is the cross-tie between the profession and me now. I reversed myself on so many subjects so often, on things worth while in years past, and they didn't or couldn't follow. It is such as that which has made the profession say I am never stable and have nothing final to the development of Chiropractic. I have NO pride of opinion — am only 'stubborn' on what my experience and judgment dictate is right.

"This is your FIRST slip. Will others follow? When and where will you end? Every 'beginner' has a 'beginning' when he 'begins' to 'begin', who faced same problem YOU faced—somebody presented something, he thought it good, he bought, later it proved no good. What is more, every time everybody bought, it was because 'it WAS Chiropractic'—the 'beginner's' idea of Chiropractic. The 'master' evidently does not know Chiropractic. Because of many minds, many men, many kinds of Chiropractic strewn over highways and by-ways. Of course I know that YOU know. Because YOU know, that's evidence that I DON'T know. The woods are full of those who do and don't know. And the 'do's' consist of everything; 'don'ts' consist of little. After all this has been settled, then what? The 'do's' either keep on going down, or they will retract. It takes little courage to become a 'mixer.' All he has to do is gravitate. It takes more back-bone than average Chiropractor has to retrace and retract. The 'don'ts' have nothing to retrace or retract. Ability to separate chaff from wheat is what marks 'beginner' and 'master'. Of course I know YOU have that ability for you told me so.

"The 'beginner' IS a 'beginner' because he 'begins' doing the things he shouldn't. The 'master' IS the 'master' because he IS 'master' of that ability that knows difference between what IS and what ISN'T. I know YOU know that difference—that's why YOU bought. I know I DON'T KNOW that difference—that's why I DID NOT buy. Who knows—some day YOU may be 'master' and I may be 'beginner.' YOU know what's good and bad, right and wrong. But so does every other fellow know the same—didn't they buy radionics because the Lincoln sold them? That's why ALL buy. And that's exactly why 'Chiropractic' is no longer Chiropractic.

"What may be construed to be 'right' or 'wrong' are questions of understanding of problems and solutions of them and, after all that is a question of depth to which one may or can or does go, to know its all and many ramifications. No one now living has gone as far, as deep, or as thoroughly into question of health and dis-ease as I, regardless of whether it be Chiropractic or not. And this is no pride of opinion. I know more of its many and all angles than any living. It is that DEPTH of understanding which saves me from pit-falls that my friends sincerely try to drag me into, but which my eagle eye saves me from. Time—up till THIS time—has proved that judgment sound. THIS time it may fail, but same judgment that saved yesterday is saving today.

"And so you say I am a 'master' and you are a 'beginner', and yet 'beginner' suggests many things to 'master'. This is always sound. 'Master' IS 'master' because he DOES listen to his 'beginner's' embryo. The fundamental remains that 'master' IS 'master' because he is able to weigh relative opinions of 'beginner', pass them through mind of 'master' and know difference in judgment between 'many-sided problems' that 'master' has on HIS hands as against few 'beginner' is BEGINNING to see. That's difference between 'beginner' and 'master.'

"Millions die and millions of fond friends remain behind. Millions who linger want to contact those 'gone ahead'. Millions attend spiritual seances and 'communicate' with their loved ones 'beyond the river.' And how consoling it is to know they BELIEVE they do. There must be a great comfort in that ability to give consolation to those who want to do that kind of thing. Nobody would call those millions fools, stubborn, or disbelievers, or possessing a pride of opinion. Some of the rest of us, however, have studied the black arts, have known how 'spooks' are manufactured; how ectoplasm is created. WE WHO KNOW WHAT WE KNOW are not stampeded in judgments, reason, or logic.

To attempt to tell these believers that it is manufactured artificially, would be a waste of time. Many of these believers go on believing, go to their graves believing. I am convinced they believe what they want to believe; and what they believe is a question of horizon and ability to understand. Those who know fraud behind materialization spiritualism are few. Those who believe in spiritualism are numbered by millions. I have been intimate with the spiritualistic movement for forty years—I know. I have exposed many—yet they continue to invite me to speak to their camps, KNOWING THAT I KNOW WHAT THEY KNOW—because they KNOW I am honest, based on THEIR knowledge, and still am not stamped by their hokus-pokus. Interesting?

“I think I have ability to secure facts, value, and put them where they belong. I know keen distinctive difference between ideas that befuddled my friends and those I fight shy of. I know value of opinions of friends which I want and need, but I need my self-respect more—especially when I can confront them with their wisdom and wait for time to prove my conclusions sound. I do not sprint to my marathon objectives.

“Had an interesting experience this past month. Several friends told me about a certain instrument I should secure and use. Early reports had me buffaloe. If they sustained themselves, it was worth while. Work I was told had me mystified. They temporarily had ME believing some. I had to ‘believe’ what I heard and saw, but could not explain, especially when ‘convinced’ it DID possess merit. However, I took six weeks to ferret the ‘mystery’ and now it is as simple as day. It just didn’t ‘work’ when broken down. I had overlooked the simple, obvious. I heard glowing tales about its accomplishments here and there—some of whom wrote telling me what I should do. Well, I followed their advice—and saved myself!

“I know men who have them say ‘It measures with extreme delicacy and accuracy the total amount of life force in the body ***.’ Some go so far as to claim ‘it has helped *** to get a better understanding of each patient’s case and enables the patient to determine his own progress.’ It is minds that make such statements as these that chase other rainbows as well. There is no possible constant in any reading with the instrument. Nobody can make one. With every reading a variable, no two times alike, where is ‘the accuracy’ of anything? Minds run riot when they make such statements. The same mind that could have made the above quotation, could also tell me BT was the great thing; but I am prone to say that the mind that can’t see thru the fallacy of the ‘accuracy’ of such instruments couldn’t see thru the fallacy of anything else equally as fallacious.

“And what a surprise you got with your FIRST lesson. What a surprise I have received more than once, with first lessons I have had on experiments and tests. Take the above series of experimental tests I have just finished conducting. Friends of mine purchased the equipment. You see, they knew it was Chiropractic. They suggested I buy. If I did NOT ‘buy’; but I did call upon and talk to inventor, asked him to loan me an outfit, which he did for six weeks. At first I thought I had something. I continued research. The farther I went, the less it stood up. The farther I went, less reliable it became. Now came courage! I wrote the manufacturer a clean-cut, frank, honest letter what I found. There was a time when I would have conducted research and then PUBLISHED my findings to protect the ‘beginner’ from ‘beginning.’ Not so any more. The reason is not hard to find. The ‘beginner’ IS a ‘beginner’ because he IS a ‘beginner.’ Desiring to be a ‘beginner’, he will! All king’s horses and all king’s men! Today I investigate because the ‘master’ wants to continue to be the ‘master.’

"In your second letter, you refer much to getting Dr. Logan and me together, etc. Nothing of that kind is necessary. When I felt conditions warranted, and I was justified for and in behalf of Chiropractic, I have never faltered in my footsteps or hesitated for one moment TO GO DIRECT to party involved and make MY OWN negotiations. I never like back-door methods to an issue. One common fault I have is being too blunt other way. If Dr. Logan has anything which I become satisfied is a step upward to further develop, elucidate, or defend Chiropractic, I shall not hesitate to establish direct contacts to that end. However, so long as I am convinced to contrary, you nor anybody else could edge me up to something which has not, can't, and will not stand the test. You could ably quote Spencer. I do not condemn 'without investigation.' I never have; I do not now. I KNOW BT. I knew it long before Logan had it. I knew it back in Hurley and Sanders days. I KNOW IT NOW AS LOGAN TEACHES IT, as late as last month. I know its principle and its practices. I know what it is you think you see; you think you do; and you think you get. I know why it does not, cannot, and will not stand up. You suggest some 1500 BT users. I admit frankly that there have been THAT MANY BUYERS. But BUYING and continuing to use are different issues.

"I contend, for HIO, that it is an all-complete principle and practice and needs no bolstering or support from any other method. Practically every BT user I know USES IT OCCASIONALLY AND THEN IN CONJUNCTION WITH CHIROPRACTIC, such as HIO. And why the crutch? When two methods are used, which one gets case well? Neither you nor anybody else can answer intelligently and correctly. I suggest you drop HIO for ONE YEAR; never adjust a vertebral subluxation. Confine your work to BT exclusively. Then take inventory. No BT man has yet had that confidence that I have heard of. I doubt if you would. Yet, many men are running HIO practices WITHOUT EVER using BT.

"Rip Van Winkle once said: 'It's a great world IF you DON'T WAKEN.'

"Nothing written has personal application. It is written in general terms, and applies generally and alike to all. You have written in that spirit to me, and I return the compliment. Time has always been the great leveler. It has proved so in your opinion of me. It will prove itself so in my opinion of you. So, suppose you let TIME march on—it always has—it will now.

"It was mighty fine of you to write. Do so at any future time. Feel free to come here any time.

"As ever,
"B.J."

Findings Based on Research

The above article is based on our findings in research work conducted with the electroencephaloneuromyotomograph. This is an instrument for measuring and evaluating volume, rhythm, pulsation, and recording quantity flowing nerve force. It can be used both before and after adjustment; before and after any form of treatment to prove relative comparative difference of its effect upon nerve supply stream.

We have conducted such research tests on persons, both before and after Chiropractic adjustment; both before and after 'basic' treatments; both on efferent and afferent sides of nerve force cycle.

We further conducted research tests with the suggested BT-yourself treatment method herein stated, and we find it accomplishes same net result as basic treatment mentioned in above article.

Upon proper showing of credentials, at time of our convenience, we can conduct further research tests upon request of those interested and who believe in basic treatments — they to present their cases and give their own professional treatments under our necessary laboratory conditions to produce accurate findings which we will stipulate; giving basic treatments in any form they please, so long as it is according to standard Hurley-Saunders-Logan teachings and not an evasion of fact; after which we will again take the before record and take an after record and compare records of both methods for a comparative likeness of net result. If, however, investigators in our opinion are not interested in facts and want to pursue controversy for publicity purposes, or that of "accepting a gauntlet," then WE will not be interested further and shall withdraw our offer — we to reserve the right to publish all findings and reproduce graphs, etc. We here shall in final analysis be arbiter and judge as to sincerity of investigators and whether it is worth trying to convince people who have no desire to be convinced of what facts are of relative value of their methods. This has been our attitude towards all research work, and it will continue as such.

The Story of
ACCIDENTAL CAUSATION OF DISEASE
and
ACCIDENTAL CURE OF DISEASE

The Chiropractic principle is that a concussion of forces PROduces a vertebral subluxation which becomes THE cause of all dis-ease. In so stating, we have here omitted each sequence between one and other.

This "concussion" of forces is the clashing of two opposing factors, one external — invading body; other internal — resisting invasion. Whichever is greater overcomes other, violating integrity of structure. This "concussion" of two opposing forces does occur in endless and varied ways, such as twists, wrenches, falls, breathing obnoxious gases, eating spoiled foods, in various so-called "playful" ways such as slapping on back, being hit by falling objects, etc. External or invading force is and has been applied for centuries "accidentally" in contrast to being intentional.

If this premise is sound, then we not only infer but firmly assert that *every* person who has *ever* gotten sick, regardless of how many millions involved or millions of years in which it occurred, got sick because of an ACCIDENTAL concussion of forces producing a vertebral subluxation. We also assert that *every* such person of all time who WAS sick and GOT WELL did so because of an ACCIDENTAL REDuction of that vertebral subluxation — all this notwithstanding claims of medical men, their theories propounded, tried, and denied. That sick people HAVE gotten well, from time immemorial, from a long list of so-called differing diagnosed diseases, is obvious. That there has never been any consistent explanation of HOW or WHY well people got sick, or sick people got well, is also obvious. Not until this explanation has there been any sane, sensible, or sound explanation offered and proven. This explanation is so universal in application that it applies with equal force to all vertebrata — be that elephant, horse, cow, dog, cat, etc. They have vertebral columns, get sick, get well, as well as man.

Chiropractor affirms that sickness IS PROduced by a veterbral subluxation, and PROVES his principle with his practice of REDucing that vertebral subluxation by reversing method or process of its PROduction by INTENTIONALLY introducing INTENTIONAL external invasionary force, producing concussion of forces, external invading force meeting with resistance of Innate internal force, thus REDucing vertebral subluxation, restoring health.

For many years we have collected *thousands* of reports from newspapers and magazines, of cases where individuals HAD AN

ACCIDENT AND GOT SICK, HAD ANOTHER ACCIDENT AND GOT WELL. Medical men stand by aghast, offering no explanation as to why or how. Religious people say it was "a miracle from God" — "prayers were answered," etc.

Till advent of Chiropractic explanation in 1895, there HAD BEEN NO EXPLANATION offered which could be duplicated INTENTIONALLY by man. Today an ACCIDENT can occur and person get sick. That case can go to a Chiropractor and INTENTIONALLY get well by reversing principle of PROduction, by using same principle of REDuction.

It would be tremendously interesting reading if we could print this series of *thousands* of cases in our collection. To do so would require books. We have picked a few as samples to prove the Chiropractor principle and practice:

"Hit on Head,
Man Regains
Lost Hearing.

"Point Mugo — AP. One of the greatest moments in the life of Sgt. Paul M. Miller was when he was hit accidentally on the head by a softball.

"The Army reported yesterday that the blow on St. Patrick's Day restored the sergeant's hearing. The native of Waynesville, N. C., has been deaf since August 1, 1943, when he was shot down over Roumania's Ploesti Oil Fields while serving as a tail gunner on a B-24 bomber."

"A Pat on the Back Restores
Vet's Power of Speech.
"Tribune Leased Wire

"Ogden, Dec. 25 (1948). — A Christmas miracle Saturday enables a returned Ogden war hero to welcome his wife and family with a cheery 'Merry Christmas' after four long years of silence caused by a war wound.

"As a result of an accident, Parley P. Pratt, Jr., 32, of 100 Jefferson Ave., early this morning uttered his first words since suffering a wound in the neck in the Battle of the Bulge in 1945.

"Mr. Pratt had completed his night's work for the Ogden Union Depot Company and was on his way home to spend Christmas Day with his family. He had trouble getting his car started and had just lifted the hood when he fell and struck his head against the running board of the car. He was picked up by a passer-by and, without realizing it, carried on a conversation telling how his car wasn't operating and how he fell.

"It wasn't until he met a neighbor later that he realized he had spoken. The shock was great and tears of joy streamed unashamed down his face. He greeted his wife, LaWren, with a cheery 'Merry Christmas' when he entered the front door. ***** He has been a patient in veterans hospitals all over the country but specialists had told him he would never be able to speak above a whisper again. *****"

"Fall Cures an Invalid

"Injury Vanishes After 19 Years

"Sheboygan, Wis. March 4 — (Special). Mrs. John Holman, who for 19 years has been a semi-invalid because of a spinal injury, left her home to do some shopping. She slipped on a patch of snow and sat down hard—very hard. When she got to her feet she was astonished to discover whatever had troubled her spine had been 'bounced away'. Mrs. Holman plans to crowd housework and exercise into her days to make up for the 19 years of semi-invalidism."

(Milwaukee Sentinel, March 5, 1941.)

"Horse's Kick Corrects

Montana Man's Vision.

"Broadus, Mont., April 14 — (AP). Harry Brown, a cattleman at Powderville, was cross-eyed for 35 years after a boyhood baseball accident. Recently his saddle horse kicked him in the face, breaking his nose. A few days later, Brown's eyes straightened and his vision improved, he said, 'about 100 per cent.'"

(Waterbury (Conn.) American, April 14, 1941.)

"Blow Restores Memory

**"Man Hits Head With Hatchet and
Becomes Normal**

"Atlantic City, August 10. — Edward Clark, a painter's apprentice, fell from a scaffold four months ago and was injured about the head in such a manner that when he recovered, his life prior to the accident was blank to him. Today, while chopping wood, the hatchet he was using caught in a clothes line and descended on his head. When he was revived, Clark remembered everything. His mind now in perfectly normal."

(Post-Dispatch, St. Louis, Mo., Aug. 11, 1912.)

"Thrown From Horse,

Deaf Man's Hearing Is Restored

"Newark, Ohio, Jan. 23. — Garry Board, a young farmer of Alexandria, of this county, suffered a sunstroke while mowing hay two years ago and was rendered deaf and dumb and his right leg paralyzed. A colt which he was riding yesterday threw him heavily to the ground and then ran away. Impulsively, he attempted to call 'whoa' and greatly to his surprise he could speak and hear. Physicians are puzzled over the case."

(Observer, Washington Pa., 1/24/12.)

"Tack Restores a Voice

**"Penetrates Sole of Blacksmith's Shoe
and Power of Speech Returns.**

"Nashua, Iowa, Aug. 12 — A sharp tack which penetrated his foot through the sole of his shoe suddenly restored to Henry Rickhoff his power of speech. He had been unable to talk since about a month ago when he was knocked unconscious by a stroke of lightning, which struck a barbed wire fence near which he was standing. Rickhoff was at work in a blacksmith shop when he stepped on the tack. The pain caused him to cry out and he is now able to speak as well as ever."

(Rock Island (Ill.) Argus, Aug. 12, 1911.)

"Lightning Restored Voice.

"Remarkable Experience of Former Williamsport Woman.

"Struck by a bolt of lightning one year ago and losing the power of speech as a result of the shock, Mrs. D. Walter Spence of Springfield, Ohio, a daughter of Alvin D. Fagley, 126 Ross Street, has had that power restored to her by a second bolt, which tore itself from a tornado Saturday evening. The news was conveyed to Mr. Fagley by telegram yesterday."

(Sun, Williamsport, Pa., June 18, 1912.)

**"Daylight Breaks for Blind Man
When Dentist Pulls His Tooth.**

"Sandusky, Ohio, March 29. — Partially blind for five years, totally blind for the past seven months, Edward Kennedy, 39 years old, a farmer residing at Parkertown, saw the light today after the extraction of two teeth.

"The case is said to be without parallel in dentistry. Mr. Kennedy had been declared beyond human aid by eye specialists, and had obtained a pension from the blind relief fund. Doctors gave the cause as paralysis of the optic nerve."
(ADVERTISER, Montgomery, Ala., Mar. 30, 1912.)

"Accident Stirs Science

**"Eyesight Restored to Man When He Fell
Against Desk.**

"Milwaukee, Wis., Feb. 3 — 'Accidents where persons have their eyesight injured and later restored by striking the eyeball accidentally, are exceedingly rare', according to Dr. T. C. Phillips, regarding the case of William Hornberger, whose eyesight was restored by striking his eye against the corner of a desk. 'More scientific methods are now being used in performing operations to restore the sight and in removing cataracts from the eyeball,' said Dr. Phillips."
(Inquirer, Philadelphia, Pa., Feb. 4, 1912.)

"Mule Kick Medicine

**"Cured Man of Dumbness Caused by Accident Some
Time Ago.**

"Altoona, Pa., May 22. — Struck dumb by an accident some time ago, Mike Lozik regained the power of speech when he was kicked on the side of his head by a mule."
(Evening Sun, Baltimore, Md., May 22, 1912.)

"Jolt in a Wagon Heals a Cripple

**"Physicians Were Unable to Aid Invalid Who Was Hurt
by a Long Fall.**

"Midland, Mich. Jan. 20. — Ritchie Johnson, for three years an invalid on crutches, appeared on the streets today without them. IT WAS NOT A CASE OF FAITH CURE. EVER SINCE HE FELL FROM THE PEAK OF A BARN OVER THREE YEARS AGO he has been unable to sit up straight. He was a familiar figure, lying on his side in his buggy when riding, or on crutches when walking.

"DOCTORS TRIED TO BUT COULD DO NOTHING FOR HIM. He was for several weeks in the hospital at Ann Arbor. His case was regarded as hopeless.

"Last Sunday, he drove to Mount Haley to attend a funeral. The roads were icy and the horse, which acted peevish, after a good trouncing, BOUNDED VIOLENTLY FORWARD. MR. JOHNSON WAS SHAKEN UP AS HE HAD NEVER BEEN SHAKEN BEFORE. HE PULLED HIMSELF TOGETHER

AND WAS SURPRISED TO FIND HE COULD SIT UP STRAIGHT WITHOUT PAIN.

"That night he ate his first meal sitting up at the table. The pain seemed all gone and he felt like a new man. Since then he has laid aside both crutches and is walking as straight as anybody.

"THAT JOLT KNOCKED THE KINK OUT OF HIS FALL THREE YEARS AGO AND HE IS THE HAPPIEST MAN IN TOWN. DOCTORS THINK HE BENT OR TWISTED A NERVE OR SOMETHING IN HIS BACK, AND THAT THE JERK IN THE BUGGY MADE HIM AS GOOD AS NEW. HE IS THE WONDER OF THE TOWN." (The Sunday Republic)

"A Soldier who was wounded on the head at Gettysburg, remembered nothing after that time, though all events up to that time remained ever clear to him. Forty years afterward, he was thrown from a horse, on his head, and with the accident came back to him all the details of life during the back years." (Indianapolis News, Aug. 24, 1907.)

The Story of IOWA GUMBO

New Orleans has gumbo soup — sort of soup-stew with crab, lobster, and other ingredients which one wades thru.

Iowa has gumbo soup, too — sort of goo which it is almost impossible to wade thru.

About 25 years ago, we addressed a Knights of Columbus convention in Dubuque, Iowa. Dubuque is 80 miles north of Davenport, on banks of Mississippi River, hills on each side.

This was an evening banquet talk. We finished about 9:00 p.m. and started home in our big Nash, with plenty of horse power under hood. We arrived home at 5:00 a.m., next morning — 7 hours going 80 miles. Coming over those hills we got stuck in Iowa gumbo, mired in mud, hub deep in slippery, slimy goo. Every half mile, we had to stop and dig out mud plastered between spokes of wheels. As bad as it was, all went well in this one-way mud rut until we had to pass another stuck car or one coming towards us. Problem then was how to get out of center-road rut, give half the road, without getting so far out on shoulder with possibility of slithering off into ditch; for in those days, in most cases "shoulder" meant just plain nothing. It was usual to pass other cars in ditches. We wished we could pull them out, but to attempt it would mean they probably would pull us in. Farther we went away from Dubuque, worse it kept getting. Nearer we came to Davenport, madder we kept getting. Iowa gumbo raises finest corn, cattle, and hogs in the world. It also raised hell with motorists. We tumbled into bed, determined that as early as possible that day, and as frequently as we could, we were going to holler "Iowa Mud" until we wakened Iowa people, Iowa politicians. We were not the only ones who raked Iowa over the coals. EVERYBODY in Iowa who traveled Iowa roads were incensed; but none had vocality or means of expressing their wrath. We had! We had Iowa's ONLY radio station — 500 watts, 400 meters — pounding all over Iowa and the West, into every home right now.

Our WOC slogan, which we capitalized over the United States in those days, because we were pounding all over the United States and into foreign countries, was:

"Out where *the West* begins and in the State where the tall corn grows."

That day, we changed this slogan to:

"OUT WHERE *THE MUD* BEGINS, and in the State where the tall corn grows."

We began a hammering, hollering, indignation campaign, day after day. We shamed Iowa. We invited any speaker who wanted to speak AGAINST IOWA MUD. They came by hundreds. Every person who had a grievance against IOWA'S MUD could have time on our air. We pounded away until we awakened interest in Iowa politicians.

We proved thousands of cross-country car travelers would go thru Illinois, up north into Wisconsin and Minnesota, and then west. They would go thru Illinois, south into Missouri, then west. They gave Iowa a wide berth. Hundreds of thousands of dollars, annually, were diverted around Iowa. We brot this out with vivid examples. We made Iowa MUD-conscious, ROAD-conscious, made them ashamed of this stick-in-the-mud, backward, most fertile soil, Eden garden spot of the world, stuck in mud.

Iowa DID wake up. Politicians were roused into action. They began IMMEDIATELY to put in hard roads. Taxes collected FOR hard roads, formerly, were being diverted into political pork barrels. We aroused such a blizzard and avalanche of protests we caused taxes to begin flowing right now into proper road-building channels. Believe it or not, today Iowa has more miles of hard roads than any other state west of the Mississippi.

This shows what people CAN do when they have a voice in running their state's finances. Thank goodness, today Iowa is the favorite cross-country going-west state. Our Lincoln Highway and Grand Army of the Republic Highway are tops. Millions of dollars annually now flow into our commercial coffers because of that campaign way-back-when.

Because of getting stuck in the mud we got mad at mud and decided to do something about it. We had the means, the method, the radio station, and the intention. We tackled the job, accomplished our objective. Good roads in Iowa can be blamed on, or credited to Radio Station WOC.

We've heard much about "those good old days," but for us we'll take present-day hard roads. We can get where and when we want to go, depending upon starting.

We have now gone back to our old slogan:

"Out where *the West* begins and in the State where the tall corn grows."

The Story of WHAT DO YOU THINK?

Can you picture Catholic priests giving examinations to eligible Baptist ministers to determine their qualifications to be ministers? Can you imagine Baptists conceding to it?

Can you picture scientists of chemistry giving examinations to eligible astronomers to determine their qualifications to be astronomers? Can you imagine astronomers conceding to it?

Can you picture New York State Senate giving examinations to eligible Texans to determine their qualifications to be Texans. Can you imagine Texans conceding to it?

Can you picture masons giving examinations to eligible carpenters to determine their qualifications to be carpenters? Can you imagine carpenters conceding to it?

Can you picture department store clerks giving examinations to eligible managers to determine their qualifications to be managers? Can you imagine managers conceding to it?

Can you picture labor unions giving examinations to eligible manufacturers to determine their qualifications to be manufacturers? Can you imagine manufacturers conceding to it?

Can you picture Chiropractors giving examinations to eligible medical students to determine their qualifications to be medical doctors? Can you imagine medical men submitting to it?

Can you picture a medical doctor going to jail for six months on principle; and a Chiropractor being acquitted of a mercy killing?

Do you know what examination Pope Pius needed to become Pope?

Do you know what examination Mr. Truman needed to become President of the United States?

Do you know what examination Henry Ford needed to become the world's leading industrialist?

Do you know what examination Thomas Edison needed to become the greatest inventor in the world?

Do you know what examination General Eisenhower needed to become a college president?

Do you know what examination the United States needed to become the world's leading nation?

Do you know what examination B. J. Palmer needed to become the world's leading Chiropractor and top man in radio?

Why examinations? Do not the weak always fail? Will State Board examinations keep Chiropractors STRAIGHT? Does a license to practice Chiropractic keep Chiropractors out of physiotherapy?

How many medical colleges have risen and fallen since the beginning of medicine?

How many Chiropractic schools have risen and fallen since the beginning of Chiropractic?

How many Chiropractic students have started school and never completed their education?

How many Chiropractic students have completed their education and never practiced Chiropractic?

How many graduates have practiced Chiropractic only to fail and eventually stop?

Is it not principle that withstands the abuse of time and carries man on to the achievement of success?

Is it not the vertebral subluxation that causes dis-ease?

Is it not the adjustment of vertebral subluxation that removes causes of dis-ease and causes restoration of health?

Does physiotherapy, mechanotherapy, or naturopathy adjust subluxations?

Will an examination in bacteriology give you a better adjustment?

Does the ability to mistakenly diagnose make a Chiropractor a better adjustor?

Is there any rhyme or reason why a Chiropractor should be examined in bacteriology and diagnosis?

How long does it take average individual to learn to adjust?

Is there any reason for extending our course longer than it is necessary to learn how to adjust?

Is any more than an adjustment needed to get sick people well?

Of the forty-four States referred to as having Chiropractic legislation, how many have truly Chiropractic Boards?

Of the forty-four States referred to as having Chiropractic legislation, how many actually deny Chiropractors freedom of practice which that science enjoys?

Of the forty-four States referred to as having Chiropractic legislation, how many insist upon adjuncts and modalities along with Chiropractic?

Is anything LESS THAN true Chiropractic legislation, legislation?

Is there anything to ADD TO Chiropractic?

Is it not the ability to analyze, ascertain and determine a vertebral subluxation and the adjustment of the vertebral subluxation that makes a successful Chiropractor?

Does it take thirty-six months to teach Chiropractic?

Does it take thirty-six months to teach the art of analysis and adjustment?

IF it does not take thirty-six months to teach Chiropractic, should we insist upon thirty-six months?

IF we insist upon thirty-six months, and it does not take thirty-six months to teach Chiropractic, with what should we fill in the time?

If field men insist upon thirty-six months and schools fill in a thirty-six months schedule, and graduates are BASIC SCIENTISTS instead of CHIROPRACTORS, who will be to blame?

ANSWERS COULD BE MOST INTERESTING.

(Bulletin issued by The Reaver School of Chiropractic, Dayton, Ohio, March, 1950.)

The Story of WANT TO HIRE AN INSTRUCTOR?

A recently graduated Chiropractor stopped by my office the other day, seeking a part time instructing job in R.S.C. As we talked and discussed what I thought was Chiropractic, he informed me that I was all wet. My fault was that I had learned specific adjustment; I had learned toggle recoil for specific adjustment; and that Chiropractic had lost sight of the necessity of BALANCE.

"Here, I'll show you what I mean," he said as he peeled off his coat. "Strip to the waist."

Not wanting to ignore knowledge that I was "cheated" of while attending school, I obliged. Here is the process I was put thru:

Without checking the spine in any way, shape, or form, I was placed on the high-lo table, face down. The doctor then measured the length of my arms by pulling them downward towards my feet and over my back. Having assured himself that one arm was longer, or shorter, he then measured the length of my legs by pulling on ankles. Here, again, he found one leg was too short or too long.

Now I was ready for the rare treat. I was given a thrust on one of the shoulder blades and then had my arms remeasured. Another thrust, another measurement, and the doctor was satisfied. Next, the ilii were held down and a thrust was given to one of them. Now my legs were measured and again the doctor was satisfied.

At this point a level was produced from his pocket and placed on my back. Now I underwent the process of being "leveled" from skull to coccyx. During this time there was no spring tension on the table. I merely sagged here and bulged there. A push here, a shove there, nothing hard, just enough to "level" me.

The next procedure was "stretching." A hand was placed on upper dorsal and other on sacrum, and traction was applied. After that, a hand was placed on right shoulder and other on left ilium, and again traction was applied. Finally, my adjustment concluded with traction being applied from left shoulder to right ilium. I was completely adjusted.

Want to hire an instructor? Yes, I wish I had room at this time for this chap on the staff of the R.S.C. HE IS THINKING, at least.

(Bulletin issued by The Reaver School of
Chiropractic, Dayton, Ohio, March, 1950.)

The Story of "THE CHIEF"

Around The PSC, WOC, and WHO, one will frequently hear various executives and some of the Faculty refer to B. J. as "The Chief." This is used by them as an endearment as well as placing him as tops amongst them.

B. J. is called many names, such as "B. J.," "Colonel" (in radio circles), "Doctor" (in professional circles), "Mister" (by those who do not know him) "Reverend" (a title conferred on him by the late Billy Sunday), and "The Chief."

However, it is not generally known that B. J. is a blood brother in two Indian tribes: "Skikihushu" of the Montana Blackfeet — which means "Big Four Bears," and "Matatopa" of the Sioux of South Dakota — which means "Big Medicine Eagle." By "blood brother" is meant each of the two participants — B. J. and the Indian Chief — cut their wrists and mingled their bloods.

So "The Chief" is aptly applied two ways — here and with Indians.

In the Correspondence Office in The B. J. Palmer Chiropractic Clinic, are photos of B. J. all bedecked in Indian regalia presented him by the Sioux tribe. The costume is hanging in the museum showcase in the hallway of The B. J. Palmer Chiropractic Clinic building. It includes everything — eagle feather headdress, beaded coat, vest, pants, moccasins, saddle blanket, wampum bag, etc.

The Story Of LEGISLATORS, LEGISLATURES, STATUTES, LAW, MALPRACTICE

(In Collaboration with Hugh Chance, LL.D.,
Asst. Counsel, International Chiropractors
Association.)

We are vitally concerned about two issues:

- our profession
- law, as it affects us.

Let's start with the beginning — the legislator.

He is a cross-section of all our people — farmer, banker, baker, merchant, politician, doctor, lawyer, etc.;

- each has his typical background;
- each knows his own interests, little of any other.

Legislatures are a conglomerate people, thinking conglomerate ideas. As a result, they have varied solutions to varied problems.

Legislators congregate as a legislature.

Special interests have special axes to grind;

- each wants much to protect his own and cares little about others.

Special interest bills are presented;

- a conglomerate mass and mess, each expressing his opinion on what he knows well, relying on others for that which he knows least about.

From then on, it's a question of trading votes — compromising

- you vote for what we want; we'll vote for what you want;
- no one person can know intelligently all about all varied intimacies or State's interests of each bill before them.

Bill starts out in good form;

- amendments are introduced by committee to whom it is referred;
- some are adopted, some rejected.

Using this State as one example, in last Iowa legislature, hundreds of bills were presented;

- session lasted 90 days;
- legislators must do two years' work in 90 days;
- no legislator can read all bills presented in that time, let alone understand them;
- confusion results;

— bills must be referred to committees for study.

- A bill MAY start out in good form;
- amendments are submitted in committee hearings;
 - it then goes to floor of House or Senate;
 - more amendments are introduced, some adopted, some rejected;
 - some amendments aim to strengthen bill, others to weaken it;
 - some amendments aim to kill bill, others to pass it.

When bill is passed by House, it may not be same bill at all;

- same thing occurs in Senate.

Proponents or antis — neither are pleased with it but become satisfied because “it was the best we could get to have it passed.”

When signed by the Governor, or passed over his veto, it becomes a State statute;

- it is the law of the State up to and until it is interpreted by the Supreme Court of the State.

If Supreme Court sustains it, the statute stands;

- if Supreme Court rejects it, in whole or in part, part rejected is not valid law, and is same as if legislature had never passed it;
- ambiguous portions of a statute are interpreted by Supreme Court.

Court tries to arrive at intention of the legislature.

Fact that a statute has been upheld and interpreted by Supreme Court does not necessarily mean it is a good statute — a fair one — or a just one. Good or bad, it is THE law unless and until it is repealed or modified by new legislative action; which means a new bill going thru same legislative and judicial mill just described.

Right or wrong, “the people” are supposed to have spoken by and thru their duly elected representatives in the legislature.

Under that statute, people who violate its terms can be arrested, tried, and convicted; or arrested, tried, and acquitted by jury trial.

Again the people have a voice beyond the legislature in juries;

- if people refuse to convict, statute is valueless;
 - if people convict, statute is deemed to serve its purpose.
-

Anything may and sometimes does come out of a legislature.

As an extreme issue, they COULD pass a statute saying a horse is a cow;

— anyone calling a horse a horse, or a cow a cow, is guilty of misdemeanor;

— somebody may say that very thing, be arrested for committing a misdemeanor, be convicted, and fined;

— he carries it to Supreme Court where it is finally interpreted that a horse is a horse and a cow is a cow.

In Kansas, they once had a statute which said that when two trains meet at a crossing, neither should proceed until the other had passed.

In Georgia, a statute says that no one can marry his mother-in-law.

In Kansas City, it was illegal for a girl under twenty to use lipstick.

Such ridiculous statutes would be unenforceable;

— the law is what the people will permit to be enforced — no more, no less.

Under professional practice acts, such as medicine, osteopathy, chiropractic, optometry, dentistry, barbers, beauticians, etc., a Board is provided for;

— Governor appoints Board members — three, five, or more.

— These are political, and are usually given to those who belong to the party, or to personal friends, or upon proper persuasion.

— Board members, sometimes but not always, are picked because of their capabilities to serve those interests involved.

— Board holds examinations, asks questions, grades accordingly;

— oftentimes questions are unfair or are unfairly graded.

Some laws are monopoly control laws which place one entire profession under an unfair statute where an opposition profession controls — such as Basic Science Bills controlled by medical interests, screening out any person or groups of people medical interests do not want in.

When people are arrested, tried “by due process of law”, court rules according to language of statute, or what he thinks was intent of legislature.

In a CRIMINAL issue, case is tried by language of statute, by

what judge thinks was intent of legislature, and by decisions of Supreme Courts having a bearing on issues on trial.

Upon conviction, case can be appealed, upon

- unconstitutional grounds;
- unfair trial;
- unfair rulings of court;
- etc.

Supreme Court can declare statute unconstitutional;

- define intention of legislature;
- declare trial unfair and remand case back for another trial, etc.;
- sustain lower court, its rulings, and verdict of jury.

As in instance cited of horse and cow, Supreme Courts hand down decisions based on fundamental, sensible law, tried on principles rather than practices; based on rules for interpretation of ambiguous language of statutes passed by a conglomerate mixture of legislative thinking.

Example: Supreme Courts have held there are three great fundamental principles involved in healing arts as practiced today:

- a. medical principle — function is overstimulated or underinhibited;
medical practice — stimulate the inhibition or inhibit the stimulation.
- b. Christian Science principle — dis-ease is an error of thot;
Christian Science practice — to correct error of thot by prayer.
- c. Chiropractic principle — dis-ease is caused by a reduced quantity of mental impulse supply of nerve force superinduced by vertebral subluxation;
Chiropractic practice — to adjust vertebral subluxation by hand to permit restoration of normal quantity of mental impulse nerve force supply between brain and body.

Example of application:

Chiropractor knows he must adjust; thinks he HELPS adjustment by massaging back muscles, using heat pad or hot bath to relax muscles to prepare case for easier and more natural adjustment.

Supreme Court would contend use of massage, heat pad, or hot bath was done to inhibit contraction and stimulate relaxation; therefore IS practice of principle of medicine.

Chiropractor thinks, because he does not prescribe drugs or use knives or inject hypos, etc., he is NOT actually practicing MEDICINE.

Supreme Courts try issues by PRINCIPLES used, not method used.

Another example:

A certain Chiropractor had two offices — one across hall from other;

— in one, he used nothing but Chiropractic principle and practice;

— in other, he used various physiotherapy and naturopathic methods.

— He alone gave adjustments in one office, and had assistant across hall using other methods.

His contention was HE was using nothing BUT Chiropractic. It was shown that both offices were under his name and, altho he received one fee DIRECTLY for adjustment, he also received same fee INDIRECTLY for work done across hall, for which he paid an assistant. He thot he was getting around the law. Supreme Court saw thru the evasion.

All of above were CRIMINAL trials, where accused was charged with being a CRIMINAL until tried and convicted or acquitted.

There is another type of case known as a CIVIL trial

— where issue is a dispute between two individuals;

— which is tried by court sitting as arbiter,

— wherein testimony is taken for both sides.

Cases in which we, as Chiropractors, are vitally interested are malpractice cases,

— wherein Chiropractor is accused of having done something he shouldn't have done,

— or didn't do what he should have done.

MALpractice means bad-practice.

Two far-fetched cases, and the results:

1. Absolutely straight Chiropractic office;

— did everything Chiropractic he should do;

— did nothing he shouldn't have done.

— Case comes in, is given adjustment;

- case dies on table, within a few minutes.
- Widow sues for malpractice, claims damages.
- Chiropractor did what he should do;
- did nothing he should not have done;
- no MALpractice.
- Case comes to trial;
- judge asks WHAT WAS DONE;
- he is told.
- No case of MALpractice;
- no damages possible.

2. Mixer's Chiropractic office;

- did what he should have done;
- plus doing things he should not have done.
- Case comes in, is given adjustment
- plus violet ray, vitamin pills, and other medical methods of treatment.
- Case gets entirely well, gives testimonial, and swears to it.
- Wife sues for malpractice, claims damages.
- Chiropractor MALpracticed Chiropractic.
- He also MALpracticed medicine.
- Case comes to trial;
- judge asks WHAT WAS DONE;
- he is told.
- There IS case of MALpractice.
- In absence of injury, there is no damage and court will award none;
- but if there is any damage at all, however slight, court can award at least nominal damages.

Question of one case dying and other getting well is NOT a matter of evidence; nor are results, good or bad, on trial.

What HE DID is on trial;

- what he didn't do which *he should* have done;
- what he did do which he should *not* have done.

In malpractice cases, generally accepted rule is:

Where ONLY Chiropractic is used, expert testimony of CHIRO-

PRACTORS ONLY is permissible.

Where other than Chiropractic is used, testimony of MEDICAL MEN is permissible, on two issues:

- a. whether Chiropractor was negligent in what he did
- b. whether he was negligent in omitting to do what he should have done.

Chiropractors are trained to be Chiropractors;

— they are not trained to be medical men.

If what they practice IS medical, and they practice medicine,

— they are guilty of negligence

— because they fail to have proper skill and training as medical men.

Example:

Practitioner "A" holds himself out as a Chiropractor — practices Chiropractic — does not use any medical procedure.

— Standard of care expected of him must be judged by standard Chiropractic procedures — not medical procedures.

— Medical men are not experts on Chiropractic procedure;

— they cannot testify whether practice was good or bad Chiropractic.

— Chiropractors CAN testify.

Practitioner "B" holds himself out as a Chiropractor AND physiotherapist.

— Physiotherapy is medical procedure because it treats effects;

— is used by medical men.

— Standard of care expected of practitioner "B" is medical *and* Chiropractic.

— He is negligent if he does not have skill and training in both Chiropractic *and* medicine.

— Both medical men and Chiropractors may testify against him;

— statutory definition of Chiropractic in Chiropractic Practice Act makes no difference;

— medical men can still testify if Chiropractor used medical procedures.

It is obvious that testimony of physicians will be against Chiropractor. Amount of damages will depend upon testimony.

Malpractice is much like fire insurance in how much risk YOU care to assume.

- a. You have a home worth \$15,000.
- b. You insure it against fire.
- c. You secure a fire insurance policy.
- d. Always read the fine print, for that is what determines how much risk insurance company assumes, and how much YOU assume.
- e. Suppose garage is under house — your policy states you are entitled to one five-gallon red-painted can of gasoline — no more. That is risk THEY assume.
- f. You, by carelessness, ignorance, or deliberation, have FIVE five-gallon cans, only one of which is painted red. You may NEVER have a fire, and then again you may have one tomorrow.
- g. You have a fire. Total loss. You can recover nothing because YOU assumed additional risk not covered by policy.

Malpractice is in same category.

- a. You studied Chiropractic, secured a diploma in Chiropractic, have a license to practice Chiropractic — nothing more or less.
- b. For one of many reasons, YOU may think YOU have a perfect right to do anything you please; use any method you wish.
- c. If you do, YOU assume the risk.
- d. You may NEVER have a case of malpractice; then again you may have one tomorrow.
- e. Your diploma and license entitle you TO PRACTICE CHIROPRACTIC — nothing more or less.
- f. These do not entitle you to practice medicine in any of its branches, regardless of what you may think you want to do, or think you have a right to do.
- g. If you assume risk, you must assume loss of your reputation, business, and financial standing, if you go beyond your license.
- h. By time newspapers have smeared your trial all over papers, where you have been accused of negligence, you will come out loser, even tho you win case.

Any patient CAN START suit regardless of which way you practice;

— can CLAIM damages to any extent.

- It costs him nothing to START OR TRY a suit because patient's attorney usually works on a 50-50 split fee of whatever damages jury allows — large or small.
- This is not true with you on defense; total expense is yours.

For this and these reasons, it pays to do two things:

1. Take out malpractice membership in I.C.A.; win or lose, you are money ahead.
2. Confine your practice within scope of Chiropractic and never practice outside of it if you wish to play safe against malpractice suits.

One typical case in Wisconsin:

Case of paralysis below 12th dorsal.

- Chiropractor said, "You have a tumor on spinal cord at 12th dorsal."
- On this DIAGNOSIS, he adjusted 12th dorsal.
- Patient died.
- Widow sued for \$100,000.

On trial of case, because Chiropractor had diagnosed "tumor on spinal cord at 12th dorsal", medical testimony was permissible and introduced by physicians.

- They testified they held a post mortem;
- found no "tumor on spinal cord at 12th dorsal" but did find tumor on brain which had caused paralysis.
- They even went so far as to testify that "had Chiropractor CORRECTLY diagnosed case as tumor OF THE BRAIN, he would have adjusted at different place and case might be well and alive today."

Diagnosis is medical practice.

- Chiropractor is *not* licensed to *diagnose*.
- Chiropractor IS licensed to *analyze* vertebral subluxations and adjust them.
- Had Chiropractor not diagnosed, he would have been safe, regardless of fact that case died.
- He did what he should not have done;
- therefore, "he did not adjust where he should have."

Jury allowed \$100,000 damages for loss of income of husband the rest of his life, had he lived.

In this case, Chiropractor assumed to carry risk of malpracticing on his case.

Another extreme case:

In Utah, a Chiropractor was palpating spine of patient.

- Patient asked, "What is that on my back?"
 - Chiropractor said, "It looks like a boil."
 - Utah Supreme Court held Chiropractor diagnosed;
 - that Chiropractor WAS practicing medicine.
-

The PSC has never had a malpractice suit in 55 years.

Students often think they have a right to do whatever they please, in our public clinics, or

— some interne or staff member may get idea he can do whatever he pleases in The B. J. Palmer Chiropractic Clinic.

Altho we have had hundreds of thousands of cases, we have never assumed to carry the risk of doing what we shouldn't, or not doing what we should.

Students in public clinics and internes in our Private Clinic often think we are unnecessarily strict or too rigid in rules and regulations we lay down as to what they can or cannot do in these clinics.

Those rules and regulations are made to protect ourselves against students' doing something they should not, or not doing what they should.

Dr. Chance IS strict, which we admit. Some of his rules seem unreasonably harsh or unnecessary. We give him NO LATITUDE to relax these rules, for on them hangs question of malpractice suits.

Think it over!

An ICA membership helps The ICA put Chiropractic over, establish public relations, build your business in cooperation with everybody else who is helping to build your business. Give The ICA a membership of 5,000 and it can accomplish anything and everything you want and need have done to protect, defend, and preserve Chiropractic in its purity for posterity.

What About Malpractice?

Altho malpractice cases are relatively rare, the individual Chiropractor is always concerned with what would happen if he should be sued by a disgruntled patient. When a Chiropractor is actually named as a defendant in this type of case, it is small comfort to know that he is only one-in-a-thousand. The practitioner has two principal worries:

- (a) a substantial judgment threatening accumulated life savings;
- (b) threat to public acceptance of Chiropractic and consequent loss of practice.

Even tho practitioner is meticulous, tho that any one of his patients could be a plaintiff in a malpractice action; that anyone can bring a law suit which he would be called upon to defend, is a source of concern. If such a situation should occur, Chiropractor would want best possible defense. Merely to compromise the threat of a money judgment is not enough — he wants a service which will protect and defend Chiropractic so that after the smoke of court battle has cleared away, his reputation as a Chiropractor has not suffered irreparable damage. Reputation is something money can't buy.

That is why more and more Chiropractors are turning to ICA. Not only do they want assurance of reimbursement of legal costs, but also they like the policy of the Association because it never compromises. Then, too, they are proud of the record of the legal department — nearly a quarter of a century of tried and proven service in malpractice cases with adverse judgments of less than 1½ per cent of the total damage demand.

Here's the Difference

ICA is not a profit-making business — its interest lies in protecting Chiropractic, and every cent of its income goes for that purpose — whether it be defending Chiropractor in malpractice case or in securing better public and legal acceptance of Chiropractic.

It is assuring to know thousands of Chiropractors across the North American continent and in many parts of the world are joining hands in this great International Association. If any of its members faces a legal action arising out of the practice of Chiropractic, it is the mutual concern of all. That is why cost of membership is so low. One of our statisticians put it this way: it would take 831⅓ years to pay a \$5,000 judgment at the rate a member pays ICA membership fees.

In addition to defense and reimbursement features in malpractice cases, many other services are available to members: Research, publicity, public relations, legislative counsel, patient referral service, and many others. Every dollar of membership fees is an investment in future welfare of the Chiropractic profession. ICA membership carries with it service and prestige that no Chiropractor can afford to pass up.

To minimize risk of malpractice actions, ICA Legal Department offers a few practical suggestions:

1. Always maintain highest type of Chiropractic service possible.
2. Keep accurate case records showing all pertinent data concerning each case. Keep records up to date. Retain X-ray films in case files — they form a part of the Chiropractor's case record.
3. Keep abreast of the latest scientific developments in Chiropractic by attending local, state, and international conventions and review courses.
4. Do not promise a patient that you can cure him. Avoid exaggerated claims.

The Story Of
THE ORDER OF THE GOLDEN PLOW

"Order of the Golden Plow

"Reaffirming our abiding faith in the bounteous goodness of Iowa's fertile land, and Recognizing that the hand of the man is essential to its continued development, and The fruition of its unlimited capacity for production; We of the Tall Corn Country welcome into our fold certain men who have achieved distinction in the field of their choice; ONLY those we deem to be true sons of soil and toil, and Herewith we extend lifetime membership in the

Order of the Golden Plow

To

B. J. Palmer

"Who, during a rich and full life has contributed so much and so well to the ideals to which we aspire; Henceforth he shall be known as a charter shareholder in our Golden Order, and We consider this a rare and privileged opportunity to so honor this distinguished visitor to our glorious City of Des Moines, Capital City of Iowa, the greatest agricultural State in the United States.

"In Witness Whereof

I, Mayor of the City of Des Moines,
Hereby set my hand and seal.

(Seal)

Heck Ross"

Only fifteen life memberships in the Order of the Golden Plow, as named by Mayor Heck Ross of Des Moines, have been issued in its history:

1. John E. Johnson, President General Motors.
2. Lee R. Jackson, President Firestone.
3. Charles Brannan, Secretary of Agriculture.
4. Harold Stassen, President University of Pennsylvania.
5. Edward J. McCarthy, President Florists Telegraph Delivery Association.
6. Mrs. Lee Hutton, National President American Legion Auxiliary.
7. Walter Frye, President Izaak Walton League.
8. Harry S. Truman, President United States of America.
9. Thomas E. Dewey, Governor State of New York.

10. General Omar Bradley, United States Army Chief of Chiefs of Staff.
11. Paul Bagwell, President National Junior Chamber of Commerce.
12. Harold Keats, Former Commander Amvets.
13. John D. Farrington, President Rock Island Railroad.
14. Dr. Alexander Ruthven, President Michigan University.
15. Colonel B. J. Palmer, President Central Broadcasting Company; President Tri City Broadcasting Company; President The Palmer School of Chiropractic.



**The Story Of
B. J.'s FOUR AND ONE-HALF TON ELEPHANT**

"B.J. Has an Elephant — A Dead One

"Dr. B. J. Palmer who collects most everything, or almost everything, now has added the ultimate to his collection. He has an elephant!

"It's not a live one. In fact, it's very dead. But the thing is, B. J. has an elephant. And is he happy about it? B. J. likes the unusual.

"The elephant, a 4½ ton model, died late Friday when Mills Bros. Circus was playing in Davenport. B. J., one of America's No. 1 circus fans, as usual, spent a big part of the day on the lot. In fact, he even rode one of the elephants in the opening spectacle of the circus Friday afternoon.

"Friday night, one of the elephants with the show, which had been ailing for some time, died. Immediately, Jack Mills, owner of the circus and a close friend of B. J., called up Palmer.

" 'Want an elephant?' he asked.

" 'Wonderful,' was B. J.'s reply.

"It would have been more difficult for B. J. to house a live elephant, so he was happy with a dead one.

"B. J. wants to save the skeleton and have it assembled at the Palmer School of Chiropractic. This is going to present a problem, according to Stanley Kelsey, owner of the Clinton Rendering Company which has the giant pachyderm.

" 'We had a terrible time — the worst ever — in moving that big hunk,' Kelsey said. 'I don't know how we're going to salvage the bones.' He says it would be impossible to boil the meat off the bones. 'About the only way would be to take the bones out — way out — in the country some place and let them stand in the hot sun. And then, phew, the smell! Even then, I think it would take several years to get all that meat off the bones.'

" 'It was a tremendous job to move the dead elephant,' Kelsey said. 'We used our biggest truck and winch to haul him on board. Even then, we had to have help from another elephant to push and pull the dead beast onto the truck. Once, the truck almost went over on us. The loading job took three hours Friday night.'

"The Davenport Rendering Company assisted in the loading operation.

"The Clinton firm found their cutting floor was not large enough, and their ordinary facilities entirely inadequate for the elephant.

As a result, they had to cut the huge animal into pieces outside Saturday morning.

"But B. J. has his elephant — his first one, too.

" 'What I'll do with it is my problem,' he smiles."

(Democrat and Leader, Davenport, Iowa, June 4, 1950.)

"B. J. Finally Gets an Elephant

"Body of Six-Ton Pachyderm Presented to School

Head After Circus Beast Dies of Tooth Extraction.

"Dr. B. J. Palmer's search for an elephant skeleton consumed many years and took him over a large section of the globe. But the quest ended Friday, and virtually on Dr. Palmer's doorstep.

"The carcass of a six-ton pachyderm was presented to Dr. Palmer by Jack Mills, head of Mills Brothers Circus, which gave two performances Friday in Davenport under the sponsorship of the Lions Club.

"The beast, pictured in Friday's Times, died unexpectedly following the afternoon show, of complications which set in after a tooth had been pulled Thursday. Ironically, Dr. Palmer said he had been permitted to ride the elephant for a brief period Friday, just before the elephant's end came. Circus people said they weren't expecting the beast to die.

"Dr. Palmer has sent the body to a rendering works with orders to have the skeleton returned. The skeleton will be mounted at the Palmer School of Chiropractic hospital.

" 'At last,' Dr. Palmer sighed."

(The Daily Times, Davenport, Iowa, June 3, 1950.)

"B. J.'s Elephant Skeleton

Covered By Too Much Meat

"Dr. B. J. Palmer's dead elephant — from which he hopes to achieve a long ambition of owning an elephant skeleton — is causing trouble in the hot weather. It was taken to the Clinton rendering plant where it proved too big to process, and the meat too tough to be removed from the bones quickly.

"An aroma developed with the hot sun and now workmen will have nothing to do with the dead elephant. It is causing a problem in Clinton, and rendering works officials won't even guarantee delivery of the skeleton to B. J."

(Democrat and Leader, Davenport, Iowa, June 6, 1950.)

"Pachyderm, Hot Weather
Worry B. J.

"Col. Palmer's dead elephant is creating a dilemma, an aroma and a disappointment.

"The six-ton carcass of the elephant, a late member of Mills Bros. Circus, was given to Dr. B. J. Palmer last Friday, you may remember, when the beast died unexpectedly. Obtaining an elephant skeleton long had been one of Dr. Palmer's ambitions.

"But skeletonizing the pachyderm has proved to be a problem.

"The carcass was taken to Clinton, but proved too large to be treated in the rendering plant. Hence, the huge body was left outside the plant, but the meat proved too tough to be removed from the bones quickly. The sun has been hot this week and — well, workmen now have refused to work on the elephant's carcass. In fact, they won't go near it.

"B. J. says the rendering works can't guarantee exactly what they'll do about the elephant now. They can't even promise that they can return the skeleton to him."

(Daily Times, June 6, 1950.)

Associated Press carried following story:

"Davenport, Iowa. — A long search for an elephant's skeleton has ended for Dr. B. J. Palmer of Davenport, Iowa. Palmer has looked for an elephant's skeleton for many years to place in his school of Chiropractic. Yesterday, unexpectedly, he was given the carcass of a six-ton elephant. The animal, owned by Mills Brothers Circus, died following the matinee performance in Davenport Thursday. Death was attributed to complications which set in after one of the elephant's teeth was extracted."

"Finis

"Col. B. J. Palmer has given up all hope of obtaining the skeleton of the elephant, a late member of Mills Bros. Circus, that died as the result of a tooth extraction last Friday.

"The carcass of the six-ton pachyderm was too large to be treated in a rendering plant in Clinton. Now, the odor issuing from the decomposing carcass is displeasing many Clinton residents, and so it probably will be chopped up and buried, according to Col. Palmer."

(The Daily Times, Davenport, Iowa, June 8, 1950).

"No Elephant Bones for B. J.;
Rendering Company in Clinton Is
Unable to Salvage Skeleton.

"Clinton, Ia. — B. J. Palmer isn't going to receive his elephant skeleton after all.

"The Clinton Rendering Company, which took on the job of attempting to salvage the bones of a dead circus elephant, have given up the job as hopeless.

"All B. J., head of the innumerable Palmer enterprises, is going to have out of it, are a couple of hip bones from the giant pachyderm.

"Mills Bros. Circus, playing in Davenport, a week ago, presented the beast's body to Palmer after it died. Palmer wanted the skeleton of the elephant to be placed at his Palmer School of Chiropractic in Davenport.

" 'We were dubious about the job when we started it. After getting into it, we found it was going to be impossible to save the bones,' said Stanley Kelsey, head of the Clinton Rendering Company.

" 'It was the biggest job we ever took on, and I don't want another one like it.'

"The animal was so large that the regular rendering plant was too small to accommodate it. As a result, the elephant had to be cut up outside.

" 'It took all our men three days last week to get the job done. We tried to save all the bones, but it was impossible,' said Kelsey.

"Several of the large hip bones were saved for Palmer by the rendering company."

(Democrat and Leader, Davenport, Iowa, June 11, 1950.)

The Story Of "FAMOUS FATHER" CONTEST

"Here's First Clew in 'Famous Father' Contest

Sponsored by Retail Merchants

"Here is the first clew in the 'Famous Father' contest sponsored by Retail Merchants Bureau of Davenport Chamber of Commerce:

" 'The only son of his father, he moved to Davenport in 1885 at the age of four years.'

"Blanks are now available in retail stores, and those desiring to enter the contest may secure them and mail their selection of the 'famous father' to the Father's Day committee at the Davenport Chamber of Commerce.

"Prizes for the winners include a \$100 savings bond, first place, \$50 bond for second, \$25 bond for third and ten \$5 cash awards.

"In case first clew isn't sufficient to reveal identity, five more will be published in newspapers and announced over the radio. Next clew will be announced Monday, with others following June 7, 8, 9 and final clew June 12.

"First 13 correct answers in order of receipt as postmarked will be announced Wednesday, June 14."

(Democrat and Leader, Davenport, Iowa, June 2, 1950.)

"New Clue Revealed in 'Famous Father' Contest

Sponsored by Merchants Here

"The second clue in the 'Famous Father' contest sponsored by Retail Merchants Bureau of the Davenport Chamber of Commerce was announced today by the contest committee. It is:

" 'As a boy in Davenport he was forced to earn his living as a newsboy, floor scrubber, and window washer.'

"First clue, which was announced Friday, is:

" 'The only son of his father, he moved to Davenport in 1885 at the age of four years.'

"Individuals interested in entering the contest may secure blanks in retail stores and mail their choices to the committee at the Davenport Chamber of Commerce.

"Prizes include \$175 in savings bonds and ten \$5 cash awards.

"Contestants may start mailing their contest blanks to the committee as soon as they make a choice. Other clues will appear

Wednesday, Thursday, Friday, and next Monday in Davenport newspapers and on radio stations.

"Winners will be announced Wednesday, June 14."

(The Daily Times, Davenport, Iowa, June 5, 1950.)

"Here's Your Third Clew in 'Famous Father' Contest

"Have you figured out the identity of the 'famous father' in the contest being sponsored by the Retail Merchant's Bureau of the Davenport Chamber of Commerce?

"In case you need help, here's the third clew:

" 'When in his teens, he was forced by circumstances to go to work for his father.' "

"Two other clews have already been published. The first one was:

" 'The only son of his father, he moved to Davenport in 1885 at the age of four years.' "

"And this was the second clew:

" 'As a boy in Davenport he was forced to earn his living as a newsboy, floor scrubber and window washer.' "

"Blanks in which to mail entries to the Father's Day committee at Chamber of Commerce are now available in retail stores. * * *"

(Democrat and Leader, Davenport, Iowa, June 7, 1950.)

**"Third Clue Given in 'Famous Father' Contest
In Charge of Merchants Here.**

"Have you figured out the identity of the 'famous father' in the contest being sponsored by the Retail Merchants Bureau of the Davenport Chamber of Commerce?

"In case you need help, here's the third clue:

" 'When in his teens, he was forced by circumstances to go to work for his father.' "

"Two other clues have already been published:

" 'The only son of his father, he moved to Davenport in 1885 at the age of four years.' "

" 'As a boy in Davenport he was forced to earn his living as a newsboy, floor scrubber and window washer.' "

"Blanks in which to mail entries to the Father's Day committee at the Chamber of Commerce are now available in retail stores. The first 13 correct answers in order of receipt as postmarked will

be announced Wednesday, June 14. Three more clues will be announced.

"Prizes include \$175 in savings bonds and ten five dollar cash awards."

(The Daily Times, Davenport, Iowa, June 7, 1950.)

"Fourth Clue Is Offered Today in
Merchants 'Famous Father' Contest."

"The 'Famous Father' contest sponsored by the Retail Merchants Bureau of Davenport Chamber of Commerce is drawing near the end.

"Three clues to the identity of this Davenport man have been published as a guide to his identity, with 13 prizes, including \$175 in savings bonds and 10 cash awards of \$5 each.

"Here is the fourth clue in the contest:

" 'He was married to a Davenport girl April 30, 1904,
at the age of 23 years.'

"If you have not yet picked up an entry blank at one of the downtown retail stores and mailed your selection to the Father's Day Committee at the Chamber of Commerce, do so now.

"Another clue will be published Friday, and the final hint will be given Monday, June 12. The first 13 winners will be announced June 14.

"To assist you in working out the correct answer, here are the other three clues:

" 'The only son of his father, he moved to Davenport in 1885 at the age of four years.'

" 'As a boy in Davenport he was forced to earn his living as a newsboy, floor scrubber and window washer.'

" 'When in his teens, he was forced by circumstances to go to work for his father.' "

(The Daily Times, June 8, 1950.)

"Here's Your Fourth Clue in
The 'Famous Father' Contest

"The 'Famous Father' contest sponsored by the Retail Merchants Bureau of Davenport Chamber of Commerce is drawing near the end.

"Three clues to the identity of this Davenport man have been published as a guide to his identity, with 13 prizes, including \$175 in savings bonds, and 10 cash awards of \$5 each offered.

"Here is the fourth clew in the contest:

" 'He was married to a Davenport girl April 30, 1904, at the age of 23 years.'

"If you have not yet picked up an entry blank at one of the downtown retail stores and mailed your selection to the Father's Day committee at the Chamber of Commerce, do so now.

"Another clew will be published Friday, and the final hint will be given Monday, June 12. The first 13 winners will be announced June 14."

(Democrat and Leader, Davenport, Iowa, June 8, 1950.)

"Fifth Clue in Contest to Learn
'Famous Father' Identity Ready

"Another clue to the identity of the 'Famous Father' in the contest sponsored by the Retail Merchants Bureau of Davenport Chamber of Commerce was announced today. Four other clues have been announced previously.

"Here is today's clue:

" 'His hobbies are the collection of rustic furniture and swords.'

"If you are not one of the thousands who have already sent in entries, and think now that you know who the 'famous father' is, get a coupon at one of the retail stores, fill it out, and mail it to the Father's Day committee at the Chamber of Commerce.

"If you are one of the first 13 to give the correct answer, you will win one of the three savings bonds or one of the \$5 cash prizes. The savings bond awards are \$100 for first, \$50 for second and \$25 for third place.

"One more clue will be announced Monday and the results will be made known Wednesday.

"The contest is a promotional effort on part of merchants to direct attention to Father's Day, which is Sunday, June 18.*****."

(The Daily Times, June 9, 1950.)

"Here's Another Clew to Help You in
'Famous Father' Contest

"Another clew to the identity of the 'Famous Father' in the contest sponsored by the Retail Merchants Bureau of the Davenport Chamber of Commerce was announced Friday. Four other clews have been announced previously.

"Here is Friday's clew:

" 'His hobbies are the collection of rustic furniture and swords.'

"If you are not one of the thousands who have already sent in entries, and think now you know who the 'famous father' is, get a coupon at one of the retail stores, fill it out, and mail it to the Father's Day Committee at the Chamber of Commerce.

"If you are one of the first 13 to give the correct answer, you will win one of three savings bonds or one of 10 \$5 cash prizes.

"One more clew will be announced Monday and the results will be known Wednesday. The contest is a promotional effort on part of merchants to direct attention to Father's Day, which is Sunday, June 18. *****"

(Democrat and Leader, Davenport, Iowa, June 9, 1950)

" 'Known by Initials', Final Clue in
Merchants 'Famous Father' Contest.

"Here's the final clue in the 'Famous Father' contest conducted by the Retail Merchants Bureau of Davenport Chamber of Commerce, and if you have not guessed already the identity of the Davenport man selected, this clue should give you the answer:

" 'He is known far and wide by his initials.'

"Thousands of answers have been received by Father's Day committee at the Chamber of Commerce, where you, too, may yet send in your guess as to the identity of the man the six clues identify.

"The 13 winners of \$175 in war bonds and 10 cash prizes of \$5 each will be announced Wednesday. The contest will close at midnight tonight, and Tuesday the contest committee, headed by Ed Hogan, will check the contestant's replies and schedule the winners, who will be judged according to the correctness of their answer, and the time they were post-marked."

(The Daily Times, Davenport, Iowa, June 12, 1950.)

"Here's Your Final Clew in
The 'Famous Father' Contest.

"Here's the final clew in the 'Famous Father' contest conducted by the Retail Merchants Bureau of Davenport Chamber of Commerce, and if you have not guessed already the identity of the Davenport man selected, this clew should give you the answer:

" 'He is known far and wide by his initials.'

"Thousands of answers have been received by the Father's Day

committee at the Chamber of Commerce, where you, too, may yet send in your guess as to the identity of the man the six clues identify.

"The 13 winners will be announced Wednesday. Contest will close at midnight Monday, and Tuesday the contest committee, headed by Ed Hogan, will check the contestants' replies and schedule the winners, who will be judged according to correctness of answers and time they were postmarked."

(Democrat and Leader, Davenport, Iowa, June 12, 1950.)

"'Famous Father' is Dr. B. J. Palmer;

Mrs. Ted Hottenstein Wins Contest

Conducted by Davenport Merchants

"Dr. B. J. Palmer, head of Palmer enterprises, was correctly identified as the 'Famous Father' by 13 winners in the contest conducted by the Retail Merchants Bureau of Davenport Chamber of Commerce.

"Mrs. Ted Hottenstein, 1025 East Fourteenth Street, Davenport, submitted the first correct answer and will receive a \$100 U.S. savings bond as a reward. Warren Straw, 3117 Eighteenth Avenue, Moline, won second prize of a \$50 bond, and Mrs. Ned B. Curtis was third prize winner of a \$25 bond.

"The next ten winners, each of whom will receive a \$5 cash award, were: Mrs. E. McCabe, 1712 Gaines St.; Elsie Frye, 325 West Rusholme; Mrs. H. Wollenberg, 2612 Iowa St.; Mrs. Harriet Sample, 2809 Iowa St.; Agnes Gilliam, 1219 Brady St.; J. L. Gilliam, 1219 Brady St.; Mrs. Walter E. Baldwin, 1225 W. Seventh St.; Paul Iske, 1101 West Sixth St.; Mrs. Harold E. Reeves, 3119 Homestead Ave., all of Davenport,

"Six clues to the identity of the 'famous father' were published in local newspapers and broadcast over the radio during the contest. The first 13 submitting correct answers were judged by the postmarks on their letters, and winners chosen on that basis. Several thousand entries were received.

"The final clue, 'He is known far and wide by his initials', pointed unmistakably to Dr. Palmer, who is universally known as B. J.

"The contest was conducted as a means of publicizing 'Father's Day' which will be observed throughout the nation Sunday."

(The Daily Times, Davenport, Iowa, June 14, 1950)

"13 Identify Dr. B. J. Palmer
As 'Famous Father' and Win
Savings Bonds, Cash Awards.

"Dr. B. J. Palmer, head of Palmer enterprises, was correctly identified as the 'Famous Father' by 13 winners in the contest conducted by the Retail Merchants Bureau of Davenport Chamber of Commerce.

"Mrs. Ted Hottenstein, 1025 East Fourteenth Street, Davenport, submitted the first correct answer and will receive a \$100 U. S. savings bond as a reward. Warren Straw, 3117 Eighteenth Avenue, Moline, won second prize of a \$50 bond, and Mrs. Ned B. Curtis was third prize winner of a \$25 bond.

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"Six clues to the identity of the 'Famous Father' were published in newspapers and broadcast over the radio during the contest. The first 13 submitting correct answers were judged by the postmarks on their letters, and winners chosen on that basis. Several thousand entries were received.

"The final clue, 'He is known far and wide by his initials,' pointed unmistakably to Dr. Palmer, who is universally known as 'B. J.'

"The contest was conducted as a means of publicizing 'Father's Day' which will be observed thruout the nation Sunday."

(Democrat and Leader, Davenport, Iowa, June 14, 1950)

The Story Of THE CARNIVAL KING

"Carnival Trend Is 'Cleaner'
" 'King' Sedlmayr Says Show Still
Draws Big 'Tips'

"Royal American Owner Recalls Start
in Business.

By Harvey Hoffman
Times Staff Writer

"There's a new trend in the carnival business. The 'hoochie-koochie' stuff and suggestive 'hanky-pank' is on the way out.

"And the authority for that statement is a man who should know. He's 'king of the carnivals,' Carl John Sedlmayr, president of Royal American Shows, now exhibiting on the levee showgrounds.

" 'We're proving that you can keep the carnival business clean and still make money,' Sedlmayr declared.

"As he sat in his walnut-paneled trailer office, which was built in winter quarters at Tampa, Florida, at a cost of \$15,000, Sedlmayr recalled the days when he first started in the 'game' back in 1914. Then he traveled a 'three-in-one' — a midway unit featuring a double-bodied boy, a mind reader, and a snake charmer. His wife, Laura, fried hamburgers.

"Today he is president of a carnival with a midway valued at \$2,000,000. Traveling on 82 railroad cars — one more than used by Ringling Bros., Barnum and Bailey Circus — the show after completing the engagement here Sunday, June 18, will make its annual tour of Canadian fairs.

" 'There's nothing like the carnival game if you go at it right,' the 63-year-old show executive asserted. 'Twenty-five years of big tips (carnival people's word for crowds) has paid off.'

How to Talk

"As you slip into carnival life, Sedlmayr explained, you speak a different language. For instance, a barker is not a barker to the show people — he's a 'talker.' A 'turn' is the description for a new 'crop' of customers coming through the gates. When you speak about your overcoat, it's your 'benny', and your shoes are 'runners.'

"The dining car on the show train is the 'pie' car and the employees' restaurant tent is the 'cookhouse.'

"A stand that flops is known as a 'bloomer' and a town where authorities are unfriendly is 'all wet.'"

"Sedlmayr laughed as he recalled the year he was playing Davenport and sent one of his agents to check on a nearby city for a possible date. 'He didn't find conditions too encouraging,' he explained, 'so he wired back, 'Bloomer. All wet. Will be back Sunday.'"

"The girl in the telegraph office called me on the telephone. 'We've got a wire here for you that doesn't make sense', she said. 'The way I read it, it says, 'Bloomers all wet, will be back Sunday.'"

"Tracing his background in the show business, Sedlmayr, a big man with white hair and heavy, jet-black eyebrows, said he entered 'through the back door.' He was born in Falls City, Nebr., where he worked in a drug store in his early teens and picked up enough pharmacy 'know-how' to try his luck in Omaha.

How He Started

"The market for half-baked pharmacists was terrible', he recalled, 'but after being on the bum for awhile and then working as a bellboy, I met a man who was selling \$2.50 fountain pens in an Omaha drugstore for 98c. He offered to set me up in business by selling me pens at \$6 a dozen. I wasn't that green as I found out I could buy them from the manufacturer for \$12 a gross.'"

"The 'carny king' said it was that venture that started him on his career as he traveled through the country vending pens.

"Following his marriage in 1910 and a trip to Hawaii, paid for by his pens, Sedlmayr changed to dollar watches which he touted by displaying a sample under water in a fish bowl. Then followed five years in the circus business as head ticket-seller.

"I also handled the concert', he said. 'That was the extra performance after the main show. I was the man who threw 'em the cop.' He explained that he gave the customers the bargain 'feeling' by taking them out of the 'blues' — the general admission seats — and allowing them to sit in the reserved section at no extra cost.

"It was in 1920 when Sedlmayr made his first big carnival success. In that year, the major rides were the merry-go-round, the Ferris wheel, and the whip. To them, however, he added a seaplane — a riding device that swung the customers around in basket seats.

"He also had a snake show and an 'ex on juice and grab' — exclusive rights to sale of hot dogs and soft drinks. It paid off handsomely, and the following year he started his own carnival.

'Like a Flash'

"The 'king of the carnivals' also disclosed how the name 'Royal American' was selected. He said he and his wife were seated in the

lobby of a hotel in Kansas City when a man posted a card promoting the American Royal Livestock Exposition.

"'It came to me like a flash,' he declared. 'Turn the words around. Call it Royal American.'

"Other show owners throughout the country today visit the R.A.S. to study its innovations. During its annual tour, the carnival, known as the 'Sunday school show' plays to between 15,000,000 and 20,000,000 spectators and travels about 25,000 miles.

"Mr. and Mrs. Sedlmayr have a private car on the show train and adjoining their car is another for two more generations of Sedlmayrs, Carl, Jr., who is assistant manager, and his wife and their two youngsters.

"When asked if he ever considered settling down, the elder Sedlmayr replied, 'No. It's like the fellow said the rainy night we were loading in mud and wet. "It beats all," he said, "what some folks'll do to avoid working."'"

*to B. F. Palmer
A Grand Person and the
Greatest Showman since the
days of Barnum
Carl J. Sedlmayr*





Having dinner with B. J. is an annual affair when the Royal American Shows play Davenport. In this foto, reading from left at head of table, going clockwise to right:

B. J., Carl J. Sedlmayr, Sr., Leon Miller producer of some of America's finest extravaganzas, Carl J. Sedlmayr, Jr., Mrs. Carl, Jr., Art Pierce, Recorder, Kaaba Shrine, Davenport, Mrs. Carl, Sr.

Other noted personages who have graced these dinners — Sally Rand and her mother, Gypsy Rose Lee and her husband.

The Story of MOTHER'S DAY

Is there a "Mother's Day?" If so, when?

There is April Fool's Day, Easter Day, Christmas and New Year's Day — but they are fixed and set because each of them comes at a certain time to commemorate a certain occasion — but, when is *Mother's Day*?

Mother's Day is set aside to think and to remember Mother as Sunday is set aside to think of and to worship God. Six days of the week we work, then on the Sabbath we lay aside the petty bickering of business and get next to the bigness of God. What harm would befall man if he were to think more about God seven days to the week? Three hundred and sixty-five days in the year we have Mother with us to cook, make beds and nurse us when sick; and then we set aside *one day of the year* to give *Mother* a kind thought and send her a bouquet of roses to prove that we have thought of her.

Why should the offspring set aside *one day* for *Mother*? Is there any reason why every day should not be a Mother's Day? The son or daughter is prone to take Mother for granted 364 days in the year, and then follow a special-notice-custom of idolizing her on "Mother's Day." Is the vein of vanity touched on that day so that *we* may wear a carnation proving to the rest of the world that *we* do, as much as to say: "Please note, if you please, that I am thinking of Mother, the proof of which is the flower I wear." Is it Mother that is honored, or do we deign to honor ourselves?

Every woman has *all* her days as one of anticipation of being a mother; 280 days of dreaming the joys and sorrows of motherhood; and then spends the balance of her days in living the retrospection of its memories of sacrifices and sufferings.

Every person so fortunate as to be the child of a mother, should analyze her days before, during, and after the struggle, and every heart-throb should be idolized as a unit of humanity as was that of the Christ who became the spiritual parent for all humanity.

To many, Mother is a material from which we came, which nothing could stop. It was the function of creation at work; it was the law from which we had no choice, for which many are sorry. To them, Mother is a bother, a nuisance, a worry to be tolerated; whose advice is an endurance, a worry to be endured; whose advice is ill-judged; whose judgment is a bore; whose love is parental authority poorly expressed.

To others, Mother is just a necessity around the house. It was Mother who washed our neck and ears and sent us off to school. She is to do the drudgery, sew on buttons, darn our socks. And the barefoot boy that stubbed his toe — it was Mother who put something on and wrapped it up. She washes our dirty dishes, keeps the house clean, cooks our meals and is a general good all-round handy person to wait upon us — all to the end that we become the heart-free, fancy free, happy fellow to come and go and make life merry. Mother knows no union hours or scale of pay. She bundled us off to our first dance at eight, telling us "to be back at ten" — we found her up, waiting past one for fear we had been hurt — and this on top of a trying day.

But, to all the rest, "Mother" has an endearing significance. We have but one. To her we pour forth our idealism, our faith, our confidence. To her we go with our troubles and worries. When we are sick as children — it's Mother we want. When we suffer, it is Mother who is just a little the best nurse that ever was. When we skin our knee, cut our finger, break our collarbone — it's Mother who stands hard by as the real soldier. When war is declared, it's we who go to the front, but the real soldier that suffers most is Mother who remains behind. When we are married, it is Mother that loses and helps us get ready. When our children come, it is the Grandmother who is our boon companion. It is Mother's kind and sympathetic understanding that eases us over the rough roads. Mother is that one all-understanding, generous, loving individual who bears all, knows all, sees all, believes all. When crime appears, it is Mother who still believes in us when all the world deserts. No matter what we do, or how bad we become, Mother is our friend.

Blessed is the man who has a Mother to whom he can go with everything, hiding nothing, concealing nothing, getting from Mother in the giving to Mother, everything that erring man needs most.

Joyful can be that man who experiences the delights of a close-up companionship of a Mother, the kind that clings close to and thru the coming-up and growing-up years of youth, manhood and perhaps death. Sad is the child who is an orphan and suffers the lack of Mother; who, perforce must accept some sort of a substitute, as good as some substitutes are, for there is nothing "just as good" as Mother. Would that we had a Mother to whom we could go — who had the sagacity of a lawyer, the wisdom of a father — called by many "the understanding of woman" and by others "instinct" or "the tuition of the female of the species" sometimes called "the weaker sex."

Gather all the jewels and riches; win all the prizes and loving-cups; attain the highest honors amongst men — Mother is the one

diadem in man's crown that is priceless, worth all the rest and then more than that.

So, kind friend, let us remember Mother every day in the year. Be she Jew or Gentile, protestant or catholic, white or black. In the morning a kiss, a love tap, a friendly hug; let us endear ourselves so that all the sacrifice and suffering of Mother will not have been in vain. Thank Mother for the wheat-cakes; thank Mother for the home; thank Mother for her love and little remembrances that you don't see that can only make a Mother just that.

Thank her for counsel that is tempered with care and love.

And, when that day comes when Mother passes to her reward, let us have no regrets at having given her any more heart-aches than were necessary; that we can again some day commune with her in the Great Beyond with no apologies to make; with every reason to be glad that the passing from earth to heaven was but a transition.

So, here's a toast to every Mother on Mother's Day; and here's another toast to every day as Mother's Day so long as we have a Mother for whom to do it; and, if Mother has gone ahead to prepare a home up there, then let us thank Mother for all she did here while she was here and thank her in advance for still exhibiting the other qualities by getting things ready for us there.

To My Mother

Your loving heart gave up a part
Of life to give my life a start;
And I, if all the world were mine,
Would worship only at your shrine.
For you, dear Mother, are to me
What all the world could never be;
Since friendships often prove untrue,
We only love and trust a few.
My debt of love I can't repay,
Just in a single Mother's Day;
So every day, my whole life through,
Shall be a Mother's Day to you.
This precept may my actions tell
"I love you," Heaven knows how well,
And not a shadow would I cast
Across your path while life shall last.
We pass this way but once, my dear,
We'll share the flowers while we're here;
I find while I my thoughts review,
That next to God, I worship you.

— NELLIE HUNT GEREKE.

**The Story of
QUESTIONS AND ANSWERS
(Answers by B. J. Palmer)**

Partial Index to Some Questions and Answers

We have tried, in the following index, to break down general kinds of questions asked in following pages. It does not cover all. Questions are so mixed, complex, and over-lapping this would be impossible.

Practically all answers are thumb-nail replies and must be accepted as such. Practically every question has been covered very thoroly in books published or to be published this year or next. We suggest you get our books for full, complete, exhaustive coverage of subjects around which questions are asked.

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226, 235, 242, 291.

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36, 53, 54, 63, 209.

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8, 179, 259, 260.

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10, 265, 269.

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161, 190, 191, 278.

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25, 46, 47, 48, 111, 220, 225, 238.

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Preface

Questions prove the depth or shallowness of thinking of questioner. Usually, question, if intelligently asked, contains within itself elements of its own answer.

Of all the lecturing before classes at The PSC, before conventions of Chiropractors from coast to coast, beyond borders north and south, we had to wait until 1949 to devote one entire period to questions and answers. It proved to be the most interesting method of education we used. It permits each person to raise HIS problem. What bothers one, more than likely bothers others. Answer to one becomes answer to others. Student in school has one line of questions; man in the field another.

Average faculty member of a school, who attends conventions, is hide-bound. In school he teaches ONE subject and his thinking revolves almost entirely within that small circumscribed circle. We are thinking now of one man who is a symptomatologist-diagnostician. That has been and is his alpha and omega. Ask HIM a question about some subject outside of that narrow circle, and he is lost. His answers draw blanks.

There is ONE man who has lived ALL phases of ALL subjects entire life of the Chiropractic movement. He has been closely an integral part of all aspects of the Chiropractic principle and practice. This man was recently introduced in New York City as "Mr. Chiropractic, Himself." He has developed these phases regardless of application, whether it be professional, personal, legal, financial, adjusting, spinography, neurocalometer, Innate, brain system, school, or field, from 1895 down to present hour. Here is ONE man who can give you answer to ALL questions. He has not been stumped yet, in giving sane, sound, sensible answers which stand up under most scientific scrutiny.

Questions and answers which follow are actual, raised by students and field practitioners. This man alone has answered them. Reader may or may not agree. That is his privilege. However, this man IS recognized authority whose opinions are reliable, authentic. It is because he IS the court of last resort his opinions were asked on THESE questions.

Question 1. Explain how a kidney can function when the nerve supply is cut off; as the experiment on a dog explained in Best & Taylor.

Answer 1. No kidney "can function" when mental impulse supply IS cut off. A kidney, heart, or other organ CAN BE removed, severed from its normal body, after which it can be immersed in various chemical solutions from which it will contract and relax; but such is NOT "function." There is a difference to be understood between a saline solution bringing about a "stimulation" or stimulated movement. Many people do not discriminate between stimulus and mental impulse action; between organs in natural situ and organs removed; between intelligent action and incoordinated movement. A muscle may be removed from a frog's leg. It is "dead" as natural, normal, intelligent function in a living frog. That removed muscle can be made to jerk by an electrical, thermal, chemical, or manual stimulus.

Question 2. Can we make only a partial correction by our adjustic thrust?

Answer 2. Can a subluxation be existent in DEAD man? Can adjustment be given to DEAD man? Answer to both is "No." Bones can be made to move in dead men, but without mental impulse supply subluxation does not exist and adjustment cannot be given. Subluxations are PROduced by two forces clashing: external invasionary force meeting with resistance of an internal force. Absence of internal resistive force makes a subluxation or an adjustment impossible.

See Nos. 229, 230, 194, 210.

Question 3. Insofar as Chiropractic is concerned, what is your conception as to how socialized medicine will affect the future of Chiropractic? Should we commit ourselves publicly?

Answer 3. Socialized medicine will make doctors automatons; remove all initiative for better service; destroy any incentive to individualize cases; break down all hope of financial gain; and will make machines of men working on human matter. Progress is made only when men can delight in building for future better-

ment of the race. Same destructive tendencies towards medicine would do same to Chiropractic. Medicine, having direct control, would make it difficult for Chiropractic to succeed under these conditions, with this distinction: medicine does NOT get sick people WELL; Chiropractic does. Regardless of taxes paid to support socialized medicine, people WANT TO get well. If medicine does not, and Chiropractic does, people will pay additional fees TO GET WELL. Same underlying conditions which now prevail WITHOUT socialized medicine, will prevail THEN if it ever becomes a reality.

See Nos. 161, 190, 191, 278.

Question 4. A patient under Chiropractic for twenty months has developed a cyst in the breast. Nerve pressure has apparently not been carried for any length of time, yet the cyst has gradually enlarged from the time it was noticed six months ago. An operation has been recommended. Cancer in patient's family has produced a mental hazard that would be reduced by such a removal of cyst. Your comment, please.

Answer 4. A cyst is a watery blister under the skin. Adjustment, with consequent restoration of mental impulse supply, would withdraw water and reduce cyst. All that is CALLED "adjustment" is not always such. Mental hazard of "cancer" is a manufactured mental state, by propaganda of medical men, to force business to them. Offset this by calmly explaining to patient simplicity of Chiropractic and what it CAN do in such cases.

Question 5. Do you believe that axis can be subluxated without atlas being subluxated (I don't); therefore, how can axis ever be considered the major?

Answer 5. Anything is possible. Such as you state is not probable. Atlas is primary. Axis may be, and frequently is, secondary. Axis can be considered major only in event Chiropractor thinks he can't adjust atlas, therefore must take axis as second best.

(See SPECIFIC SUBLUXATIONS—CONSTANTS AND VARIABLES in Vol. XXIII Palmer, 1950.)

See No. 156.

Question 6. What is the most important job of the Chiropractor?

Answer 6. Necessity is the mother of invention. Medicine never has, does not now, and will not in the future get sick people WELL, assuming its principles and practices remain as they are. This creates a NECESSITY for something that WILL get sick

people WELL. Purpose of Chiropractic is to get sick people well. That is most important job of Chiropractor. To accomplish this, calls for next most important job: educate people to what Chiropractic is and is not; what it does and does not; how it does it; then prove it, by doing it.

See Nos. 93, 175, 180, 193, 199, 207, 209, 218, 234, 214, 251, 255.

Question 7. What is the purpose of Innate within our body besides being life?

Answer 7. This question could be broadened to say, "What is the purpose of any intelligence in anything that lives?" Purpose of Innate is to PROduce intelligent action and to REPROduce intelligent duplicated forms. Intelligence prevents matter from doing wrong and keeps matter working in constructive grooves.

Question 8. What is the purpose of bacteria?

Answer 8. Germs, bacteria, microbes are scavengers. Rats, mice, mosquitos, bedbugs, crows, buzzards, are scavengers. All "nature" is to properly balance between dead and live matter. Anything that dies becomes food for that which lives. We have dead matter in our living bodies all the time. We have scavengers in us at all times, cleaning dead matter out. We should be thankful such a principle exists. Without scavengers, we doubt if any of us could live.

See Nos. 179, 259, 260.

Question 9. Which can Innate use quicker — force or energy?

Answer 9. Force, energy, power are almost but not quite synonymous terms. There is a demarcation, but lines are not clearly drawn except in abstract; and are used only by those who want to draw sharp lines in discussions. Innate uses all three.

Question 10. What can be done to turn out better Chiropractors from this school? Too many of them have missed the whole idea.

Answer 10. For fifty-five years The PSC has been teaching Chiropractic to budding Chiropractors. We have seen thousands come and go. We have seen many fail to get the big idea, and we have seen many who did. In this respect, a cross-section of our people is no different from a cross-section of any other profession, trade, or business. Many exist; a few live. Many sponge on others; a few think. You can lead a horse to trough, but you can't make him drink. You can enroll a person in a school, but you can't make him think. Vast majority are imitators who skim surfaces. Minority use

their heads and understand. We here have been trying for fifty-five years to answer your question.

See Nos. 265, 269.

Question 11. Why is the microdynameter advertised in the I.C.A. Review, stating that it shows how, when, and where to adjust?

Answer 11. B. J. Palmer is President of I.C.A., President of The PSC, and Director of The B. J. Palmer Chiropractic Clinic. He is a split personality. As one, he does things he could not countenance in another capacity. As President of I.C.A., he is an integral part of the will of its membership. As President of The PSC, he can direct its policies as he thinks best — all student body considered. As Director of The B.J.P.C.C., he will permit only those methods to be used which research has proved best.

See Nos. 172, 157, 215, 237, 243.

Question 12. Why are other schools which are not straight Chiropractic and not the Fountain Head recognized in some states?

Answer 12. Legislatures are bodies of miscellaneous people of all faiths, creeds, colors, professions, businesses. As such, they are a freak body and often pass freak legislation. Under our political boodle system, pork barrel, support given to politicians, various types of State Board personnel exist. It is within the province of freak legislation, freak boards, to accept such "chiropractic" schools as they desire, and also to reject such CHIROPRACTIC schools as they do not like. Much depends upon education of board members, backed by their prejudices, likes, and dislikes.

In several states, such as Illinois, Indiana, Pennsylvania, etc., medical boards have set up impossible medical standards for Chiropractic licensure. They issue a "limited medical practice license" or "other practitioners license" or "physiotherapy license", etc., which we cannot, do not, and will not countenance as Chiropractic. In such states, there are many non-licensed practitioners; in some, more non-licensed than licensed. Every once in a while, medical boards get a spurt and start arresting, cases are tried, conviction now and then, but generally juries refuse to convict. Campaign dies down — and that's that, once more.

Question 13. How is it that the definition varied so much since the science of Chiropractic was named and defined by D. D. Palmer, especially in various state legislation?

Answer 13. There is NO difference in fundamental principle laid down by D. D. Palmer in 1895, as advocated by him in his

book of 1910, and as now taught by The PSC, ever since. He laid down a principle that was A THEORY. The PSC adopted that principle and has researched it INTO A SCIENCE. For differences in definitions in state legislation, see Answer 12.

Many people think of "definition" as a certain phraseology, a definite sequence of specific words, and, unless those are exactly followed, definition is not the same. Definitions have wrapped within and between words certain ideas, principles, fundamentals. In this respect, D. D. Palmer drew different and varied numbers of "definitions", no two in exactly same assemblage of words, but always containing SAME ideas, principles, fundamentals. Same is true with us. We have phrased many "definitions", none alike yet ALWAYS same in purpose. There is no difference between ANY definition drawn by D. D. Palmer and B. J. Palmer. ALL encompass SAME PRINCIPLE AND PRACTICE.

Question 14. If patient has been free of nerve pressure in upper cervical region for a number of months, and exhibits no symptoms of dis-ease, why do extreme tenderness and taut muscles persist in middle dorsal region?

Answer 14. A person may be sick WITHOUT vertebral subluxation. Another person may be well WITH one. How? At 12:00 noon, a man who is hypothetically well, has an accident. Subluxation exists. He is NOT yet sick. Time is necessary to grow sickness which will result from THAT subluxation. Another man has been sick for years, caused by chronic subluxation. At 12:00 noon, he gets an adjustment. No subluxation now exists, yet he is still sick and is liable to be "for a number of months", for it takes TIME for sickness to ungrow; "— extreme tenderness and taut muscles persist" in any part of body till such time as Innate has entirely ungrown dis-ease and regrown health. Simple, isn't it?

Question 15. What is explanation of condition, or set of symptoms remaining after being under Chiropractic care for five years, yet adjustments hold well and neurocalograph readings remain practically straight with no similarity to original established sick pattern?

Answer 15. See Answer 14, and apply it to your question.

Question 16. Are there many commercial X-ray laboratories that can make good upper cervical pictures? Some of us may have to depend upon them until we are able to buy our own machines.

Answer 16. In various large cities, rather than each Chiropractor setting up his own spinograph lab, there are established commercial

tabs which confine themselves to taking commercial work for groups of Chiropractors. They will and do follow instructions in taking exactly what you insist upon getting.

Question 17. What is a sick pattern?

Answer 17. Every vertebral subluxation has a characteristic basic direction, location, degree, with its sequential constructions, interferences, and conditions. This is more or less fixed, does not vary except within certain ranges. It is what we call a "floating movement", but always within fixed limits. Consequently, when NCM is correctly used and interpreted, it will always follow a definite pattern, subject to floating variations which follow a pattern within certain ranges. This is the "sick pattern." It will not change until an adjustment is given; then it begins to reconstruct back to a "health pattern."

Question 18. After first adjustment, when would next adjustment be given — on first return of pattern, or after three patterns that look alike?

Answer 18. This is a question of judgment. It is far better to err, if such be an error of judgment, on under-doing rather than over-doing. Much harm has been done many cases by over-adjusting. Occasionally, sick pattern will return for a day or two and, if let alone, will disappear in another day or two, and case continue to get well. It is better to wait and see than it is to "adjust" merely because a "sick pattern" returns for a day or two. See No. 17.

Question 19. After adjustment is given and pattern increases, would it be an adjustment or a thrust?

Answer 19. To give an ADJUSTMENT calls for correction of misalignment, opening occlusion, releasing pressure, restoration of normal quantity of mental impulse supply. If this be done, sick pattern DEcreases and health pattern INcreases. If sick pattern INcreases, it was NOT an adjustment.

See Nos. 198, 205.

Question 20. What is in the future for Chiropractic? Will the present upper cervical work some day become obsolete; will this upper cervical work some day be replaced by something superior?

Answer 20. Who knows? Last word has not been thot, spoken, written, or printed on any subject. Tomorrow MAY revolutionize everything we think we know. But, if Chiropractic principle be RIGHT — and we KNOW it is — then any, every, and all advance-

ments will need be made in accordance with THAT principle AND practice. Obviously, you cannot advance CHIROPRACTIC towards the principle and practices of medicine backwards. In our fifty-five years, we have seen innumerable theories advanced, ninety-nine per cent of which were backwards into older methods. See No. 163.

Question 21. What does B.J. know about Chiropractic, anyway?

Answer 21. Very little! Especially is this true when we listen to what students tell us we DON'T know; or when we listen to the field who have discovered many new theories which don't or can't work. Some day we may take time off, make a tour of Chiropractic offices, and learn something about Chiropractic. When we see how much the field knows that we don't know, it makes us ashamed to think we are teaching "chiropractic." When we see other "chiropractic" schools teaching everything but what WE think Chiropractic is, we become very humble in their shadow.

Question 22. What has been learned by use of the electroencephaloneuromentimpograph which will prove Chiropractic scientifically? How will these findings affect meric schools?

Answer 22. Timpograph, as we abbreviate it here, measures, calibrates, and evaluates QUANTITY flow of mental impulse supply between any part of brain and any or all parts of body, via nerves. It proves the fundamental of Chiropractic principle and practice. It disproves anything which does not and cannot come within purview of that principle and practice. This information makes Chiropractic A SCIENCE rather than a mass and mess of theories. These findings will never change people who prefer to stand still, prefer to live in daydreams, will not be convinced when shown proof. We have proven to OUR complete understanding meric system is now obsolete. Without that evidence, others will not be convinced.

We have taken many bubbling theories which keep forcing themselves on our profession. Various Chiropractors write and tell us how they "now have the world by the tail", "The PSC will go to the dump unless we get it," etc. We get it, test it to see if it comes within defines and confines of the Chiropractic principle and practice. If it does, o.k. If it does not — and 99 per cent don't — we forget it. In some of our recent books, we print complete research of one or two instances of some of this work to prove to doubting Thomases how it is done, with what results.

We suggest you get RESEARCHING THE UNKNOWN MAN,

to be issued in 1951, with more extensive research with 'timograph.

Question 23. Do you believe that a booth at a State Fair, handing out proper and approved Chiropractic literature, is a good piece of public relations, and educational?

Answer 23. We are in favor of any and all kinds of true and truthful publicity of educational nature. Booths at State Fairs are VERY educational and need be encouraged.

Question 24. Does not our educated mind vary our normal appetites? Is it not logical to rest an organ until it can revive by removing, for instance, fats in liver deficiencies, etc.?

Answer 24. If there were some way by which educated man could accurately and positively KNOW what the liver or any other organ NEEDS, it MIGHT be possible for education to direct Innate what to demand in its appetite to correctly supply bodily needs. So long as Innate IS director and controlling factor; master of what "normal appetites" are, "educated mind" will never reverse the process. Innate demands certain things. Those certain chemicals are "NORMAL appetite". Educated does not KNOW what to demand, cannot know chemical necessities, hence any "appetite" educated wants is abnormal.

Question 25. Does any subluxation vary brain function? If so, how can superior mere always be normal? If not, how do you account for brain LESIONS?

Answer 25. Flow of Innate mental impulse supply TO educated section of brain CAN BE interfered with. This leaves Innate functioning normally and produces symptoms and pathologies in educated section of our brain. The Innate superior brain mere is ALWAYS normal. EDUCATED superior brain mere SELDOM is normal. Term "lesions" is a symptomatic or pathological term with which we are rarely concerned.

Totality of all our brains is the most wonderfully complex and compressed living organ in the world.

1st. It is divided into two great sections: portion in which Innate lives, and portion in which Educated exists. Educated exists ONLY by consent of Innate.

2nd. Each of these two major brains are further divided into two halves — left and right portions.

3rd. Vertebral subluxation which varies brain function, chang-

ing it from normal to abnormal, exists BETWEEN Innate brain and Educated brain.

4th. This variation brain function can exist on either left or right side, affecting also a left or right side inferior mere of body. Whatever "lesions" exist (a term we don't like and never use), are in Educated brain — never Innate brain.

When education decides to raise LEFT arm, it can. When education decides to raise RIGHT arm, it can. When education decides to raise BOTH arms, it can. When education decides to raise LEFT and lower RIGHT, it can. Same is true of one leg or both. Arms and legs can work in conjunction. It is a question of which side of brain you use as to which coordinated action is performed in body. Coordination of thinking produces coordination of action in body. When subluxation exists, there is incoordination in lack of control.

Question 26. What effect does lower spinal adjustment have on effect of adjusting of atlas, axis exclusively?

Answer 26. This question is mixed. If "lower spinal adjustment" were given, then how could it "effect" atlas, axis EXCLUSIVELY? If atlas or axis is adjusted "exclusively", how can that "effect" lower spinal adjustment? You do either one OR other OR both together. It IS possible to adjust atlas or axis and check out ALL lower interference readings. It IS possible to accidentally "adjust" a "lower spinal adjustment" and check out all superior interference readings. Odds are greater in favor of first, and greatly against latter.

Whatever you did, wherever you did it, in whatever way you did it below atlas or axis, would NOT be a "lower spinal ADJUSTMENT." It would be a movement of a misalignment and would have no effect on restoration of health anywhere in body except as it might happen to be an ACCIDENT affecting an atlas or axis above.

See Nos. 95, 97, 100, 119, 74, 131, 132, 173, 182, 189, 206, 226, 235, 242, 291.

Question 27. If Innate can build up adhesions to prevent further drop of organs, will not these adhesions prevent muscles from pulling them back? The adhesions defy natural force of gravity; will they not defy natural force of muscles in pulling them back in second place?

Answer 27. Adhesions support soft tissues, same as exostosis and ankylosis support and anchor bone structure. It is a normal intellectual adaptation to an abnormal pathological condition. Sensing let-down of structure, there existed a necessity for a bridging sup-

port. If, as, and when there is no further NECESSITY for bridge support, Innate will denude and remove adhesion. Once no necessity exists, muscles will have full normal play to contract and relax. Adhesions deny gravity; but when adhesions no longer exist, muscles pull and overcome gravity.

What IS the "natural force of muscles in pulling them back"? When we stand erect, "NATURAL force of muscles" is to hold ALL abdominal organs in situ. If they did it once, they can and will do it again, when they can contract normally.

Question 28. If atlas is ASL (no rotation), axis spinous either R or L, is it a constant or a variable?

Answer 28. If atlas IS ASL, it IS a rotation. If axis spinous is L, it is a constant. If atlas is ASL and axis spinous process is R, it is a variable. (See chart to make this more clear.)

See Nos. 5, 150, 151.

Question 29. In The B. J. Palmer Chiropractic Clinic, what percentage are atlas and what percentage axis? Is it correct that there are more atlas right than left?

Answer 29. Atlas predominates in percentage. ASR predominates in atlas percentage.

Question 30. Is there any justification for axis laminae adjustment?

Answer 30. There is justification for adjustment of axis laminae only when adjuster alibies his inability to adjust atlas as he should. Many people alibi everything because they are not competent, efficient, or able to do right thing right way at right time. They then fall back on their inabilities and "justify" anywhere and anything else.

Question 31. Since majority of Chiropractors have only the neurocalometer, what constants can we observe to obtain best results from neurocalometer use?

Answer 31. See Nos. 30, 153, 208.

Question 32. Does the sick pattern always change approximately fifteen minutes after adjustment is given?

Answer 32. Sick pattern begins to change IMMEDIATELY after pressure is released and normal quantity of mental impulse supply BEGINS to flow normally. It may not be noticeable in changing dis-ease within fifteen minutes or fifteen hours after that

adjustment. Heat pattern can change rapidly, within fifteen minutes or less, if done rightly; but "sick pattern" in its entirety may not change for hours, days, or weeks.

Question 33. Could a sick condition be so far advanced in its destructive stage that, due to limitations of matter, the body could not maintain life without the help of stimulating drugs?

Answer 33. If sick condition is so far gone that permanently restored normal quantity flow of mental impulse supply does not and cannot save life, then no amount of temporary stimulation of what little nerve supply IS present will save life of that individual.

Question 34. How do Chiropractic adjustments help people who have a mental condition such as those suffering from various complexes, phobias, pervers, and so-called chronic insane?

Answer 34. "Complexes, phobias, pervers and chronic insane" are sick conditions of educated brain. Adjustments permit restoration of normal flow of mental impulse supply between Innate brain, which always is normal, into educated brain which suffers with these conditions.

See No. 167.

Question 35. Is there any time when you would sanction a surgical operation for removal of a badly-diseased organ, if Chiropractic adjustments failed to correct this?

Answer 35. We understand possible necessity for surgery in a large tumor (35 to 50 pounds weight) or in strangulated hernia; but, generally speaking, surgery should be reduced to minimum. Limit of application will go far beyond what average Chiropractor thinks.

Question 36. If a person were suffering from intense pain from a condition, and receiving Chiropractic adjustments for this condition, would you sanction use of drugs (not prescribe) to inhibit this pain while still receiving Chiropractic adjustments?

Answer 36. Pain is a mental interpretation of an abnormal external physical condition. It is an educated warning signal of danger, distress, and necessity for correction. Innate has no way of knowing what to do, where to do it, or how much to do until and unless she gets signals from peripheral end of nerves, notifying her of condition to be corrected. Pain is an absolute necessity, to get well. Without it, Innate is helpless. We NEVER would suggest any

method of desensitizing pain, under adjustments. To do so is to make recovery difficult if not impossible.

See Nos. 63, 209.

Question 37. Is there a possibility of an inflamed appendix bursting and, even though interference is removed, patient die due to toxic action of the diseased appendix being spread throughout the abdominal region?

Answer 37. There is always this possibility, but it happens more rarely than is supposed or suggested by surgeons. It is to their advantage to suggest danger in all cases which call for "an immediate operation" or patient may die "due to toxic action of the diseased appendix being spread", etc. We have had such cases and, without fear or trepidation, have given adjustments and gotten them well. It is surprising what Innate CAN do, once it is made possible.

Question 38. Is the heat-measuring instrument manufactured by Dr. Redding of Kansas City, reliable?

Answer 38. Neurocalometer is an accurate, efficient heat-reading instrument. It is based on sound scientific bases. It is made to accomplish its purpose. While we lease neurocalometers, we do not make them for sale purpose only. So long as patents were in existence, nobody beside PSC endorsed or supported their use. They denied they had value and condemned them and their use. Since patents have expired, there have been various imitations offered, none of which meet exacting requirements of neurocalometer. What you get depends upon what you want to do. If you want "an instrument" and are not particular what it accomplishes, there are various makes to buy. If your desire is to get sick people well, based on absolute precision work, the neurocalometer will accomplish that end.

There are CHIROPRACTORS and "chiropractors"; "horseless carriages" and automobiles. Neurocalometer was not built down to a price. It was built up to a service. Galvanometers can be bought from \$5 up to \$55. The PSC buys THE BEST, for service to human life is cheap to some and very valuable to others. One gets what he pays for. There are Chiropractors who "adjust" for 25 cents a crack. That's what their punches are worth. Others charge \$5 per visit, and it's worth it because of high class of service. Imitations are sincere flattery.

Question 39. Vitamin manufacturers say they merely supply the

body with vitamins or deficiencies which are not contained in the soil in certain areas where soil is poor. Elucidate on this.

Answer 39. Does educated man KNOW necessity of our human bodies? He thinks he does. Does Innate KNOW necessities chemically of every organ, viscus, and tissue cell? When all is running smoothly, regularly and normally, who knows and supplies proper make and distribution of foods? Is it educated, or Innate? If Innate alone knows normal, does Innate know necessities of abnormal? If so, isn't it better to let Innate decide what the body needs? Cow eats green grass, makes red hide, gives white milk, develops yellow cheese, yellow urine, brown faeces, purple bile. If Innate can do all this and more, in animals, what about doing the same in human bodies?

Life, as lived today, has become in many ways artificial. Innate still is natural, normal, adaptative intellectuality resident within our bodies. Innate can and does take artificial, whatever its deficiencies may be, and adapt it to her needs normally. It is a safe bet one can let Innate alone and she won't starve; but begin meddling with her work, and one soon could. "Diet" means "die-it."

Question 40. Have you personally used any instrument other than neurocalometer for detecting nerve pressure? What are your opinions of these and other instruments?

Answer 40. We have never used any other than the neurocalometer in our private clinic for fifteen years, with exception of 'timpograph. If there were anything better, we would have no hesitation in getting, using, and endorsing same. We have no pride of opinion or prejudice against any other. We have secured and tested many instruments and we still use the neurocalometer for accurate, efficient delivery of health to the sick.

Many students and/or practitioners approach this problem of "what to buy, what to use" from standpoint of practice rather than principle involved.

Vertebral subluxation produces constrictive PRESSURES upon or around spinal cord or spinal nerves. This pressure offers RESISTANCE to transmission of NORMAL QUANTITY flow of mental impulse supply BETWEEN brain and body. This resistance INTERFERES with flow damming backward and upward STARVING body downward and below. At POINT OF RESISTANCE, energy is fighting to get thru. When abstract energy meets with resistance flowing thru physical medium, it sets up super heat, an increased abnormal degree of heat. This heat, in quantity, in vertebrata, is subject to measurement and location with neurocalo-

meter. The thermopile REGISTERS this heat. Neurocalometer is ONLY accurate and efficient instrument which does this. This PRINCIPLE being sound, WHY SHOULD WE use any other instrument?

Question 41. Please describe the experiment that was conducted in Germany under your auspices in connection with the theory and findings of specific cord pressure, etc.

Answer 41. The written explanation is found in our Clinic brochure. It is yours for the asking, directing your inquiry to The B. J. Palmer Chiropractic Clinic.

Question 42. William Brady, M.D., has said, in his newspaper column, that vitamins are food and not medicine. Why, then, do some Chiropractors insist on calling them medicine? Why do they dub as medicine such drugless hygienic procedures as were popularized by Bernarr MacFadden and his co-workers in the face of medical persecution? Why should we help organized medicine to appropriate to its exclusive use the procedures that it once condemned as "quackery", when Bernarr MacFadden made his methods available to the Chiropractors who bought his encyclopedia of Physical Culture, with a special consultation service for Chiropractors?

Answer 42. Anything given, taken, or used for other than natural or normal purposes is a medicine. All of us are bound by legal restrictions, regardless of what good or harm we may think any element contains. Regardless of what value you might THINK vitamins have, courts have held they ARE a medicine requiring physician's prescription. In Michigan, Chiropractic Board was instructed to file a sales tax on all such sold patients in their offices; and, if they were a jobber, a wholesale state tax.

Question 43. In your writings in "Crowding the Hour", you make the statement that a Chiropractor may check the ilium and give an upper cervical adjustment, and the ilium will level up. The Chiropractor has done all he can do and knows it. Why can't this system be used in conjunction with neurocalometer?

Answer 43. First part of this question is understandable. Second part is not understandable because we don't see application of second in conjunction with first. Neurocalometer checks resistance heat at place of interference. Any change in position of ilii is a symptom and effect of vertebral subluxation superior to that effect. NCM has nothing to do with effects.

Here is an illustration, simple and easily understood:

A physician treats a sick person. He prescribes ten different drugs, "a teaspoon every hour." Patient lives or dies; gets well or is worse. HOW does physician know which element did what?

Another illustration:

A "chiropractor" "adjusts" six different places in vertebral column for ONE localized dis-ease. Patient lives or dies; gets well or is worse. HOW does chiropractor know which place did this to that, or that to this? It resolves itself into whether he wants to continue blindly stumbling along in the dark, ignorant of what he does, OR does he WANT TO KNOW what gets results or fails to get them? HOW can he possibly separate effect or changes that take place, of one place or method as against any other? Variables defeat possibility of knowing. If ONE place is used at ONE time in ONE way, he will have established positive conclusion, yes or no! Principle of EXCLUSION is way of all science. Method of INCLUSION of variables is the way of the bungler.

Question 44. I read where you were quoted: "I hope every Chiropractor will eventually own one." This refers to microdynameter.

Answer 44. We have said, and repeat now, if that day arrives when any other instrument of value, reliable, and trustworthy, is devoid of variables, then we "hope every Chiropractor will eventually own one"; but until such time as variables are licked, its conclusions are unsound.

See Nos. 11, 40, 157, 172, 237, 243, 215.

Question 45. What is the future for the Chiropractor? I hate to think that when I open my office I will have to live in constant fear that I will be arrested and put in confinement. As long as the AMA buys off the politicians in the states to promote basic science laws, why doesn't the ICA fight just as hard as they do to gain public favor, which is in the majority?

Answer 45. Suppose every man had said what you say, regarding each new development of service to mankind. Where would we be? Suppose early pioneers had said, "I hate to think that when" I cut down virgin forest I "will have to live in constant fear" of fighting Indians. Where would you and I be today? With every gain there is a corresponding risk of offense to older order of things. For every advance there is a price to pay. Everything which is today possible for you, is because yesterday men suffered and sacrificed. It will always be thus. It is history in the making. You are willing to profit, but unwilling to labor to secure same. Such indicates cowardice. The U.C.A., then C.H.B., now I.C.A. have fought and

ARE fighting your battles for you. Help, with your membership and finances, and they will help you tomorrow win your battles.

Question 46. Is Innate Intelligence a material or spiritual faculty?

Answer 46. Answer is simple. Can you go to any store — be it drug, hardware, grocery, dry goods — and buy a pound, quart, yard, bottle of Innate? If you can, then Innate is material. If you cannot, then it is a spiritual quality, not a material quality.

Being spiritual, scientists said it could not be measured. Our reply was: "Anything which exists in fact can be accounted for in science." Innate Intelligence IS a fact. It lives in vertebrata therefore it is possible to convert quality into quantity and measure it. Our 'timpograph work has definitely proven this answer.

Question 47. When a body dies, where does "Innate" go?

Answer 47. We wish we knew. Does anybody know? Nobody who once lived, who had an Innate and then lost it when he "died" has ever returned to tell us a direct, straight-forward, and convincing answer. There are those amongst us who say that spiritualism does that; departed spirits living over yonder return and talk to us thru a "control" thru a medium. All materializations are bunk. They have been too frequently exposed. Equipment of all kinds is on the market and can be bought for a few dollars, with instructions how to use it.

Question 48. Innate varies in its expression, due to perversion of our conscious mind manifesting in many ways, i.e., disease, poor nutrition, personality defects, etc. Can Innate possibly be the soul? Conscious mind, sub-conscious mind, super-conscious mind are involved; but how, in your opinion?

Answer 48. Your first statement is sound. Innate itself, per se, has not changed. Expression has been modified. Innate has many names, according to depth or shallowness of concept. It is mind, ego, personality, spirit, soul, etc. Many try to limit terms according to religions but, regardless, it is one and same thing in last analysis.

We have discussed this naming idea with many philosophers, psychologists, psychiatrists, metaphysicians, mental therapists, etc., and all have pet peeves on what term they prefer using. When lines of concise demarcation between are definitely asked for, they become puzzled. It doesn't make any difference whether any or all of us are right or wrong, whether we rightly or wrongly name it, or

whether we can or cannot differentiate between one and other. Whether lines are rightly or loosely drawn, fact remains IT IS what IT IS, notwithstanding.

Question 49. Please talk about reason or primary developments of the malady of mental patients. Explain how, under Chiropractic, mental diseases are reduced or may be prevented.

Answer 49. Man's total brain is sub-divided into two sections — Innate brain and Educated brain. Flow of mental impulse supply that performs function is FROM Innate brain TO Educated brain. If that flow is normal, education is sane in thinking phases. If that flow is interfered with, education goes haywire, is insane, mentally off-balance. Vertebral subluxation is interfering medium between one and other. Adjust that, restore normal flow from Innate to Educated brain, and insanity becomes sane. Source is ALWAYS normal. Semi-source can be off-balance.

See No. 25.

Question 50. What is the future of Chiropractic?

Answer 50. Future of Chiropractic is permanent. No principle ever deduced out of cosmos has been or can be lost to future generations, if natural, normal, sound, and constructive in intents and purposes. Future of Chiropractors depends upon what they do to and with this principle and practice. If they abuse it, lie about it, try to pervert it in and to human service, it can be lost, as a separate and distinct profession to mankind.

Question 51. What is the best way for us, as future Chiropractors, to help unite the Chiropractic profession?

Answer 51. There is no union between oil and water, good and bad, right and wrong; neither can there ever be any union between two contradictory and antipodal principles and practices, such as restoration of normal flow of mental impulse supply between brain and body; stimulation and inhibition of reduced function. Likewise, there never can be any union between two groups who oppose each other with these opposing issues. Only thing that can unite the CHIROPRACTIC profession is for all who profess to be Chiropractors to be just that — nothing less and nothing more.

Question 52. Can you tell us why there is the clashing of forces between spinograph and technique departments?

Answer 52. We have an old medical book which says: "So many men, so many minds, so many opinions." So long as we have two

or more men on our faculty, we will have two or more men who cannot and do not think, act, speak, write, or print alike. If our faculty were ONE lone man, we would have ONE opinion expressed in our institution. Our struggle all along has been to instill one common denominator instruction from mouths of many different men who think differently. We have never been able to get all to see exactly as WE see. If you know any way of getting many men to speak exactly the same language on all things at all times to all classes, we would like to have your solution. This is as true of spinograph and technique departments as in any other walk of life.

Question 53. Please elaborate on absence of interference of afferent pathways.

Answer 53. Innate is a wise old owl. In planning and building human bodies she arranged all distribution of pathways that she might be in constant and consistent communication with all parts of her body, so she might know what was going on in all parts all the time, awake or asleep. To this end, her only method was to receive impressions from periphery of efferent fibres via afferent nerves to epiphery in brain. These paths MUST be open and full of free communication at all times from all parts. For this reason, we have yet to see any indication of any interference on afferent fibres. We can only offer this explanation; we cannot prove it except by observation in hundreds of thousands of cases.

See Nos. 36, 63, 209.

Question 54. Please explain why there is no interference to afferent transmission since both afferent and efferent are within the spinal cord.

Answer 54. We are not certain that your premise is true — that both efferent and afferent fibres ARE within spinal cord.

See Nos. 53, 36, 63, 209, 54, 62, 72, 75, 123, 202, 261.

Question 55. Do you think Adam or Eve had a subluxation?

Answer 55. We do! Eve must have been insane to have offered Adam the green pear. Adam must have been insane to have eaten of the green pear offered him by Eve. All depends upon whether or not you "believe" what The Book says about the origination of "sin". "Sin" is any abnormality not normal, any disease not at ease, any variation from Innate concept of life and health. That either or both of these mythical characters might have been sick, is possible. It's a good story and is subject to religious or scientific construction as to what occurred and its implication upon lives of all who were

children of the original family. The human family has been "raising Cain" with "sin" ever since.

Question 56. Explain the peripheral visceral nervous system — Chiropractic vs. medicine.

Answer 56. Anatomically (which is medical), there are 128 individual ganglionic brains separate from and independent of the spinal cord or brain in the encephalon. In addition to this is the solar plexus or abdominal brain. In addition to all this, there are twelve cranial nerves, vagus nerve, etc. With all this complexity, the nervous system is so mixed, the only explanation offered physiologically is the sympathetic and parasympathetic nervous systems with their "sympathy" and "reflex action", etc. Chiropractically, there is direct brain-cell-to-tissue-cell continuous flow of mental impulse supply, producing continuous flow of function. (We suggest you read on these subjects in our books which discuss them fully.)

Question 57. Is there any rule against adjusting axis when there is a variable?

Answer 57. There is no "rule" against doing anything. There is a good REASON why you should NOT adjust ANY axis in ANY variable. To do so is to make atlas constant worse, driving it more into the wedge.

See No. 151.

Question 58. You stated at one time you do not believe in miracles. At Lourdes, a woman with large uterine tumor responded immediately. This tumor was diagnosed by countless physicians.

Answer 58. At various times, in various talks, we have discussed the rule of percentages of results because of ACCIDENTAL PRODUCTION and REDUCTION of vertebral subluxations. Those very few actual cases which DO occur at various religious shrines come within the purview of that explanation. That they have been so diagnosed by reputable physicians means little because of the unreliability of reliable physicians to be accurate in diagnoses. If it is believed diagnosis WAS accurate, it could be accounted for only by the remarkable curative potentialities resident within Innate, if, as, and when channels are completely open and restoration takes place fully. In such cases, what you mention MIGHT occur.

Anything which factually occurs is explainable if analysis of man is correctly understood. There is no normal, more normal, most normal. There is no natural, more natural, or "super"-natural, as

in a "miracle." All that happens does so according to fixed eternal law of cause of action. To know law is to apply it to everything that occurs. What man cannot explain by law, he calls "miracles". Percentage of hundreds of thousands of sick who visit religious shrines WHO GET WELL is less than approximately one-tenth of one per cent. ANY explanation offered as to HOW and WHY one-tenth of one per cent get well must also explain WHY and HOW ninety-nine and nine-tenths per cent do NOT get well. The law of success or failure remains true to both sides.

Question 59. Is not legislation favored by Chiropractors to limit the students taking examinations for state licenses to "legal residents of the state", short-sighted? I think this limits movement of Chiropractors from state to state.

Answer 59. We have always felt legislation is restrictive in its intent. It is made worse when Chiropractors make it more restrictive. Worst tyrants in history have been those who suffered most from tyranny, fought for freedom, then twisted it to use against new comers. All health legislation is to prevent harm being done sick people by ignorant and incompetent practitioners of any healing method. Vital question is: WHO IS qualified. Most all Chiropractic board members today, of practically every state board, are three-of-six graduates. They ARE qualified, they admit it. But all others who come since are unqualified unless they have had more schooling than they. Average state board member today is unqualified to examine any graduate of any Chiropractic school. Questions asked are not, in the main, CHIROPRACTIC, nor are they designed to see if applicant is or is not qualified TO BE A CHIROPRACTOR to apply CHIROPRACTIC to the sick. Many Chiropractors have the idea that the United States is getting crowded. There are 150,000 M.D.'s in the U.S. alone, each manufacturing chronic cases for Chiropractors. There are only 20,000 Chiropractors in the world. There is room for 130,000 more in the U.S. Millions of sick people have never heard the word "Chiropractic", let alone taken adjustments. In our lifetime, the demand will not be supplied.

Question 60. Explain procedure you follow in adjusting a person with a broken axis or atlas. Can Chiropractic always be used on a person with a broken neck?

Answer 60. If cervical vertebrae are actually fractured, it is better to let that case alone; or, better yet, send case to The B. J. Palmer Chiropractic Clinic where experience knows best what and where to do. Chiropractic usually can be used with know-how.

Question 61. Is there any other efficient means or method of adjusting an extremely anterior atlas which has very little laterality and rotation, other than by torque through a toggle recoil adjustment?

Answer 61. There is no better adjustment upon any subluxation than the toggle recoil. This is true regardless of particular type you set forth.

See Nos. 88, 126, 163, 168, 194, 195, 198, 205, 19.

Question 62. Anterior horns are motor fibers. Atlas is not known to be able to impinge the anterior cord — only axis (if at all). Axis, logically, must be the only vertebra to cause motor malfunction. Can you elucidate on this matter?

Answer 62. Too many questions presume to set forth a medical theory and then try to link it in with a Chiropractic fact. You presume that "anterior horns are motor fibres." You presume this because anatomy said so. That does not make it so. You again presume to say "Atlas is NOT KNOWN to be able to impinge the anterior cords ***." Where do you get such presumption? You can't cross-breed medical and Chiropractic species and get anything but a hybrid, which cannot reproduce anything but theories.

Every student of anatomy studies from a so-called "standard" medical anatomy. He has the concept that because anatomy is a materiality, it is subject to being seen, dissected, photographed, and becomes a tangible reality in fact. Every new edition of anatomy books is revised to change with new evidence. Great problem is to hook up what is seen and supposed to be known with what cannot be seen and is unknown, viz., anatomy with physiology. In LIVING people we have proof of abstract and concrete. In DEAD dissected matter we have only SOME proof of the concrete. To attempt to unite one into and thru other, theories have been formulated based on matter knowledge. Best study of man IS man. Best study of LIVING man IS LIVING man. Chiropractic is a formulation of facts based on CLINICAL research rather than laboratory findings. Especially is this discrepancy observed in neurological and serological fields. Today, instead of calling it "sympathetic nervous system" it is now revised to "autonomic nervous system."

Question 63. Knowing as we do the human body cannot stand pain, please explain what you would do if a patient, after receiving a correction of subluxation, was not faithful with the retracing period but took some sort of drugs to ease pain?

Answer 63. No person likes pain. No person wants pain. There

is only one way to eliminate pain and that is to get bodily function back to normal so we have normal sense feeling. If patient insists upon taking drugs to relieve pain, there is only one thing to do — dismiss the case. If patient wants TO GET WELL, he must tolerate pain until he does; otherwise Innate cannot get him well. Medicine alleviates pain by opiates, morphine, anacin, etc., but their patients DO NOT get well. All they get IS RELIEF.

See Nos. 36, 209, 53, 54.

Question 64. What can Chiropractic do for venereal disease?

Answer 64. Chiropractic can do nothing “for venereal disease.” Chiropractic can do wonders for vertebral subluxations. Vertebral subluxations PROduce dis-ease, call it by what name you please, regardless of where it is. Quit crossing medical terms with Chiropractic facts. Think CHIROPRACTIC and quit thinking medicine.

This remind us of patient who went to a “fit” specialist. Patient complained of “rheumatism.” Doctor said he could do “nothing for rheumatism” but he “could drive rheumatism into fits, and he was hell on fits.” We can do nothing “for venereal disease” (facts) but we can drive it into a vertebral subluxation and we are hell on subluxations (cause).

Question 65. What has Chiropractic done for leukemia?

Answer 65. Answer 64 applies here with same effect.

See Nos. 167, 34.

Question 66. Is there anything more specific than Palmer toggle recoil?

Answer 66. Every specific vertebral subluxation is a three-direction torque. There is nothing more practical or corrective in application than the Palmer toggle torque recoil. Adjustment MUST untorque the torque, to correct it.

See Nos. 88, 126, 163, 168, 194, 195, 61.

Question 67. What proof can we offer that Chiropractic is a science?

Answer 67. Chiropractic is premised on a certain principle. To PROVE that principle in PROduction or REDuction is to PROVE that Chiropractic principle and practice IS scientific. Mentally, we could guess, theorize, hypothesize, and reach tentative conclusions, none, any, or all of which might be right or wrong. To use yardsticks is TO PROVE them right or wrong. Ask one hundred people

what time it is. Each can guess, and probably no two will agree exactly. By accident, two or more MIGHT GUESS correctly. To use yardstick of an accurate clock is to be certain EXACTLY what time it is. One hundred people might guess as to length, height, and width of a certain room or hall. Two or more people MIGHT accidentally guess one or more measurement correctly. Probably most of them would be off, little or much. Steel tape measure would give each direction EXACT measurements, after which all could and would of necessity be compelled to agree. Science establishes standards by which proof is offered, from which there is no difference of opinion. Chiropractic has yardsticks also, which we here in The B. J. Palmer Chiropractic Clinic use to establish facts.

Question 68. What is the best method for conquering worry?

Answer 68. Take adjustments, so that thinking is balanced between facts. It is when a person does not FACE FACTS that he worries about unrealities of things. Getting a normal mental impulse supply flowing thru educated brain induces logical and consistent thinking.

See Nos. 167, 34, 65, 64.

Question 69. If an adjustment returns vertebra to its proper juxtaposition, why cannot mechanical or surgical devices accomplish the same correction?

Answer 69. In certain cases, with use of certain "mechanical or surgical devices", such MAY occur. It is possible to use traction table, pulling head one way and feet the other, which MAY ACCIDENTALLY correct vertebral subluxations. On reverse, it could ACCIDENTALLY make them worse. Percentage of REDuction as against percentage of PROduction would be interesting to know. Inasmuch as Chiropractic makes correction INTENTIONALLY, we can and do establish percentages on that basis. Not doing or using "mechanical or surgical devices" we have no way of knowing that percentage. Inasmuch as "mechanical and surgical devices" are used medically and surgically to treat disease, they obviously would have no way of knowing what percentage of accidental corrections occurs to vertebral subluxations as the CAUSE of disease.

Question 70. Would any action taken by a wild animal in the course of healing an injury or disease be dictated by Innate Intelligence?

Answer 70. If by "action taken by a wild animal" is meant it educationally took such "action", then it would not be dictated by

Innate in an animal any more than if such "action" were dictated by education of any human "animal." Innate does not depend upon "any action taken by a wild (or tame) animal", be it quadruped or biped, for "healing an injury or disease." Innate works to constructive purposes independently of education.

If by this question is meant that an "injury or disease" occurred in a "wild animal" and it healed or got well, then such "action" would be done by Innate in "wild animal" same as such "action" would occur in "tame" animal, such as man.

Question 71. Do epidemics of subluxations exist?

Answer 71. Vertebral subluxations are single. They occur in each individual, independent of what happens in any other person. Question could be reshaped. Is there an "epidemic" of people falling off ladders? Is there an "epidemic" of people slipping and falling on icy sidewalks? Is there an "epidemic" of any kind of accident, from which occurs concussion of forces which produces subluxations?

It could be hypothetically possible that in a certain city of 100,000 people, on a certain day, hour, and minute, a certain small percentage of people could all fall off step-ladders while hanging wallpaper. If such did occur, would you explain happenstances by saying "there was an 'epidemic' of falling off ladders"? It could be further hypothesized that out of this percentage who fall off ladders on a certain day, hour, and minute, A FRACTION OF THAT PERCENTAGE could get a vertebral subluxation. Would you then be safe in saying "there was an 'epidemic' of vertebral subluxations"? Could you go further and say "there was an 'epidemic' of people who fell off ladders who did NOT get a vertebral subluxation"? A rule that works for PROduction must also explain rule of NON-PROduction. It's a poor rule that doesn't, won't, or can't work BOTH ways.

Question 72. Can a subluxation be caused by afferent cycle as well as by efferent cycle?

Answer 72. Afferent or efferent cycle does not CAUSE subluxation. Question shows lack of understanding. Subluxations CAUSE dis-ease, which is manifest thru efferent half of nerve cycle.

See Nos. 54, 62, 72, 75, 123, 202, 261, 54.

Question 73. Could a subluxation exist under this hypothetical set-up: namely, axis and atlas being devoid?

Answer 73. Some questions are "devoid" of consistency. How

could an atlas or axis be "devoid" meaning absent? As well ask: "Could a subluxation exist if individual were devoid of brain, nerves, organs, or function?"

Question 74. Condition: Suppose a vertebra in lower spine is involved in a sudden misalignment and loses its proper juxtaposition to one above and one below.

Will interference show almost immediately in Zone I or Zone II, or must a period of time elapse before atlas or axis impinges nerve fibers? And, under this condition, is the reason for impingement in atlas or axis due to an adaptation process of the spine? Assuming that atlas or axis remained in normal position when lower spine became suddenly misaligned.

Answer 74. There could be and do exist misalignments of vertebrae in lower spine without necessity of existing SUBLUXATION in Zone 1 or 2. Impingement at atlas or axis PROduces adaptations in spinal column below. Adaptations below do not produce subluxation above. It is possible to have misalignments below without atlas or axis subluxation above, but this would be rare, for practically everybody HAS a vertebral subluxation at atlas or axis as well as misalignments of vertebrae below.

Question 75. Why is only efferent impinged? Why can't afferent be impinged also?

Answer 75. See No. 53.

See Nos. 54, 62, 72, 75, 123, 202, 261.

Question 76. How can CHIROPRACTIC best be preserved for our children and children's children? (A grandfather.)

Answer 76. If every person is a Chiropractor in fact, he will get sick people well, which will educate people that it accomplishes what it sets out to do, which will convince people there is a necessity for Chiropractic, which will establish itself in minds and bodies of the public. This will establish it and fix it in category of accomplished services.

Question 77. Please define paralysis.

Answer 77. Let us imagine a four-way street intersection. Automobiles are coming from all four directions, each wishing to get on other side of intersection. None is willing to permit others to pass. All crossing lights are green. All want to go, are willing to go, but no other allows them to. This is "congestion" or "paraly-

sis" of transportation. Each car is in good running condition. Each car CAN go.

Similar conditions exist in muscular contractions and relaxations. What they need is a traffic policeman to unsnarl the snarl, to make it possible for mental impulse to untangle the tangle. "Paralysis" is nothing more or less than good muscles unable to move under control of education or Innate. This is true of any function which has gone haywire.

See Nos. 167, 34, 65, 64, 68, 99, 142, 201.

Question 78. How about the man who wants nothing but whiskey or drugs? Would you prescribe something else?

Answer 78. Stimulants are born of necessity. A person takes epsom salts because he is constipated. Another takes morphine because of pain. Another takes whiskey because he is mentally depressed. Another takes drugs as stimulant to whip up abnormally low function. All stimulants or depressants treat effects, symptoms, or pathologies. Man walks with crutch because one leg is paralyzed. Another walks with cane because his foot is sore. Habits are formed as adaptations to abnormal conditions. Normal man does not rely upon crutches. We would "prescribe" adjustments to restore normal functions so he would not need rely upon external aids.

See No. 254.

Question 79. Isn't an interference at intervertebral foramen produced by soft tissue pressure? The nerve does not take up very much of the space.

Answer 79. Loosely, we use statement that "bone produces pressure upon nerves." This is not true. Between bone itself and nerve structure are periosteum, meninges, intermenigeal spaces filled with fluids, etc. Pressure is by and thru hydro-static from one to other. All interferences are "produced by soft tissue pressure." You are right.

See No. 169.

Question 80. Why did we get such good results many years ago by adjusting just a C.P. or K.P., when you say the only place of pressure on nerves is at upper cervical region?

Answer 80. We have ALWAYS gotten results. Even first patient, Harvey Lillard, had hearing restored. On next two cases of deafness, father failed. Big problem has been one of percentages of successes and failures — first being much less than latter. With all

we did, we were bound OCCASIONALLY to ACCIDENTALLY "adjust" right one without knowing which it was, where it was, when it was, or how we did it. Problem was to systematize work to find correct answers to WHY we failed on many and succeeded on few.

Vertebral subluxation is PROduced by concussion of forces, which external force can and does enter body at ANY place. It might be feet, elbows, buttocks, between shoulders, top of head, jaws, abdomen, etc. This external invasionary force met with internal resistance and traveled to such place as subluxation WAS PROduced. As it traveled from place of invasion to point of least resistance, it dissipated itself. If invasion were at feet, it spent much wasted force traveling from feet to neck where it met with least resistance causing greatest distortion of alignment.

Vertebral adjustment is REDuced by concussion of forces, which external force also enters body at ANY place. It might be feet, elbows, buttocks, between shoulders, top of head, jaw, abdomen, etc. It could be an INTENTIONAL so-called "adjustment" anywhere along spine. This external invasionary force met with internal resistance and traveled to such place as subluxation WAS REDuced. As it traveled from place of invasion to point of least resistance, it dissipated itself somewhat. If invasion were at lumbar vertebra, it spent much force traveling from lumbar vertebra to neck where it met with least resistance, restoring greatest realignment of subluxation.

So-called "adjustment" invasionary force could be introduced at lumbar and travel to cervical area where it would REDuce actual subluxation which restored health. This distinction arises: it took far more force delivered at lumbar to ACCIDENTALLY correct an atlas subluxation than it would if less INTENTIONAL force were delivered upon atlas itself, to correct it.

Law of percentages is difference between ACCIDENTAL remote control percentage of REDuction of subluxation AND INTENTIONAL direct control of REDuction upon atlas itself.

Suggest you study THE SUBLUXATION SPECIFIC, THE ADJUSTMENT SPECIFIC, Vol. xviii, Palmer, 1934, to learn WHY it is impossible to have subluxation at any area other than occipito-atlantal-axial. Vertebrae below axis are interarticularly-osseously locked against subluxation. Similar conditions do not exist superior to axis.

Question 81. Why do we have an appetite for foods that make us feel bad?

Answer 81. We do not have "an appetite for foods that make us feel bad." We have an appetite for foods which Innate NEEDS to make us feel good. We do have dis-ease somewhere which cannot digest foods Innate demands to make us strong and healthy. Instead of reducing weak foods for weak stomach, give adjustments and build strong stomach so it can digest strong foods. Instead of accommodating weak foods to weak stomach, accommodate strong stomach to strong foods. Medicine cannot do this, therefore puts patient on weak diets which means to give only those foods which a weak stomach CAN digest. Chiropractic works in opposite way. We take patients OFF diet by giving them adjustments to build healthy stomach so they can eat foods which Innate demands, so they can digest them and thus get well of indigestion.

See Nos. 39, 42.

Question 82. What is your opinion of naturopathy?

Answer 82. Naturopathy is another one of many ways of treating dis-ease. Naturopaths stimulate inhibition and/or inhibit stimulation. They seek symptoms and pathologies and give treatments accordingly. They seldom give drugs, but do give treatments which have same objectives. A Chiropractor who knows, understands, and applies the Chiropractic principle and practice could no more be a naturopath than a fisherman is a Chiropractor. If a "chiropractor" practices naturopathy, then he neither understands nor applies either.

Let's restate this. We have motor driving water pump. If normal electricity gets to motor, it will revolve at normal speed which would mean delivery of two hundred gallons per minute. Subluxation occurs which reduces electrical quantity by one-half, which means motor will revolve one-half as fast, which means one hundred gallons of water per minute. If we were a naturopath utilizing stimulation practice, we would artificially transfer to motor a TEMPORARY build-up of induced electrical juice by absorption. Motor might or might not increase its revolutions. If it did, it would be TEMPORARY or as long as induction lasted.

Another illustration: Horse is pulling loaded wagon up hill. If load is equal to normal horse-power, neither will have trouble. But suppose horse is sick, therefore weak; load is more than horse is capable of pulling. If we were a naturopath, we would apply whip and force reduced horse-power to jump and jerk, with hope that horse, in spurts, might get load to top of hill. Chiropractic does neither of these things. It re-establishes and RESTORES NORMAL QUANTITY of electricity or horse-power permanently

to delivering normal quantity of action. Before or after stimulation would be foolish.

Question 83. I was under the impression that physiotherapy was a bastard science and did not belong or was not a part of the practice of medicine.

Answer 83. Physiotherapy is not necessarily a "bastard science" because it is no more "science" than medicine. It is a "bastard" only insofar as certain groups of practitioners deny efficacy of drugs and seek other forms of treatment to accomplish same useless objectives medicine has long sought to attain. It is a "bastard" science only as medicine enters FRONT door with stimulation and inhibition and "physiotherapy" enters BACK door with same principle — latter trying to imitate former.

Question 84. Missouri seems to have few Chiropractors under age thirty-five. What can be done to bring more Chiropractors into the field to take place of those who retire or die?

Answer 84. See Nos. 45 and 59.

Question 85. Is Chiropractic a panacea?

Answer 85. Chiropractic asserts and proves that CAUSE of ALL dis-ease is a vertebral subluxation which occludes an opening, which produces pressure upon nerves, which interferes with and offers resistance to normal quantity flow of mental impulse supply; which reduced nerve force at periphery of efferent nerves slows normal speed of action of tissue structure; which slowing process of function disorganizes relations of one organ to another, creating one only dis-eased condition of matter.

Chiropractic asserts and proves CORRECTION of ALL dis-ease is a reversal of this process, restoring normal speed of action to all organic structures, normalizing them to each other.

There being but ONE cause, ONE cure, for ONE condition, it is within logic, reason, and fact that Chiropractic IS a specific panacea for dis-ease, regardless of location, condition diagnosed, or degree.

There always will be certain imponderable elements that Innate will consider impossible to correct: Age — if too old; degree — if too far gone; youth — if condition is permitted to build to impossible stages; etc.

When Innate reaches conclusion that the house in which she lives is not worth repairing, or is impossible to repair, then and then only will the Chiropractor find himself unable to be of service

to his case. In this situation, Chiropractic could not be construed as a panacea.

Question 86. D. D. Palmer, in his book, "The Chiropractor's Adjuster," states: "Chiropractic is the adjustment of the tissues of the body and the use of things natural." When was this definition changed, and by what authority?

Answer 86. We do not recall, nor do we know where D. D. Palmer made such statement. He has said, "Chiropractic is adjustment of vertebral subluxations." He believed in "things natural" but not by use of "adjustment of tissues of body," meaning thereby any tissue, anywhere. These statements being true, definition has not changed. See No. 13.

Question 87. Is the internal construction of any other nerve meter on the market the same as that of the neurocalometer?

Answer 87. See Nos. 11, 38, 40, 44.

Question 88. Is there anything about Chiropractic that has not been told?

Answer 88. Yes, there is much to be known; much now known which has not yet been told. Getting a Chiropractic education at The PSC is much like the growth of children. They first learn A-B-C's, grow thru various stages of experience before they learn much taught them. There comes usual period when children get swelled head, know more than their parents. They must grow thru this. Eventually, they gain a bit of knowledge. They then BEGIN to become humble. Some day they may gain a bit of wisdom. Then, and not before, will they know how little they know.

Chiropractic students are same. After they have been here six weeks, they tell us how to run the school, what to teach, how to teach it, etc. We teach as much as we can. If they were more receptive, more understanding of what we DO teach, we could teach more than we do. A few students are ready for advanced work when they arrive. Majority are not. It is regrettable that slowest dullard sets pace for fastest.

Question 89. Before a woman has a child, she is advised to go under Chiropractic care. Why stop there? Why don't we deliver babies, too (by hand only)?

Answer 89. There is every reason why a Chiropractor should adjust women during pregnancy. It will make delivery more nor-

mal and natural. As to actual delivery, it oftentimes requires surgery, such as Caesarian; there may be a rupture which requires being sewed; hemorrhage may occur — none of which conditions are we competent or capable of handling, and the law would not permit us to practice obstetrics or surgery. If it were as simple as suggested, that such could be done "by hand only," and no other agencies were EVER needed, it would be simple. As it is, we have all we can do to care for chronic and acute dis-eases for which medical men have failed to do anything.

Question 90. Do you think that in the near future Palmer School will require more than eighteen months to receive a D.C., because of the added educational requirements of most states?

Answer 90. Read THE STORY OF THE 1949 EDUCATIONAL PROBLEM, Vol. XXIII, Palmer, 1950.

Question 91. Is there an explanation to the fact that some people suffer adverse symptoms in process of retracing, while others never experience these symptoms and get well "miraculously," so to speak? What actually happens?

Answer 91. There are two kinds of dis-ease: functional and pathological. There is FUNCTIONAL blindness, FUNCTIONAL deafness, FUNCTIONAL heart dis-ease, etc. In this type, there is nothing ORGANICALLY wrong with organ, itself. There is a lack of flow of impressions from eye to brain, from ear to brain, from brain to heart, etc. Adjustment of such conditions oftentimes produces what are miraculously called "miracles." Correction is one of restoring flow of mental impulses, and oftentimes produces results as quickly as restoration of light when button is turned on.

Other type is ORGANIC, PATHOLOGICAL. In this type there is something radically wrong WITH ORGAN itself. Its structure has been broken down. Adjustments can be given in such cases, but it takes TIME to rebuild them back to normal before they produce normal function.

Functional type usually has few retracing symptoms. Organic type does have many such.

Question 92. Is there any comparable length of time between the period of retracing and period of getting sick, if the Chiropractor could determine an exact time which was the start of patient's sickness (dis-ease)?

Answer 92. There is no comparable length of time. Oftentimes,

case which takes long time to get sick goes thru retracing rapidly, and vice versa.

See No. 91.

Question 93. If a person comes to PSC, he must know that PSC is best. Why, then, after he gets here, is there so much talk about going to other schools for technics, when he may be able to get all of the time requirement in 18 or 24 months?

Answer 93. Student comes to The PSC because it IS the "Fountain Head" where Chiropractic was discovered, developed, and from which the pure stream is kept pure. What he WANTS, or THINKS he wants, is Chiropractic. Knowing he would get it here is what brot him here.

After he gets here, he follows path of least resistance; that is, some students do. They think the other fellow's grass is greener. They get letter from Chiropractors at home who advise them to get "all the various kinds of technics," and if they can't get them at The PSC, to get them somewhere else. We have said: show us what a man uses, and we will date his graduation. Most men stand still after they graduate. They have the conceited idea that when they quit school they knew all there was to know or ever would be known. They are the men on third floor back who stood still. They closed their books, sealed their minds. Little do they realize there is much to learn. It is this fellow at home who often wrongly directs footsteps of fellow here in school. Fellow at home doesn't want newcomer to prove to him that he is a has-wasser who isn't up to date on latest developments and research.

There are many practicing today, from practically every year since 1895. They prefer horse-and-buggy to automobile. It has been our good (or bad) fortune to have developed more than 208 technics of adjusting. Each was better than one before; each added something of value; each eliminated some elements of danger to patient. Innocent young mind coming in doesn't know this — and he won't listen or be told. (Desiring to find out about OLD moves, get AN EXPOSITION OF OLD MOVES, Palmer, from The PSC for \$5 — today not worth 5c.)

There is a wide gulf between wishing and getting; between desiring and fulfillment. He wants best and gives worst to get it. He thinks he will work hard to attain, then cheats in examinations; buys out-moded, out-dated, error-ridden note books from others, to get something for nothing. He cheats in exams, and plays hookey all he can. Grown up men and women are kids in knee-pants and pig-tails. Day comes when it is what is IN HIS HEAD that counts

—not what he bought in note books. At PSC he finds sledding hard. When he is caught “snitching” on other’s notes, he is fined for first and second offense, and expelled for third offense.

There are paint-slingers on barns and artists on canvas. One gets seventy cents an hour, other gets thousands for one production. One is forgotten the moment he passes away, other leaves his place in history in art galleries. The PSC is an institution where we endeavor to instill spirit of artists, which calls for hard, laborious work. Some students “can’t take it.” They realize our methods call for downright strenuous development. Rather than go thru this, they think they can go somewhere else and get something that will work while they idle their time playing billiards across the street.

See Nos. 94, 6, 175, 180, 193, 199, 207, 209, 218, 234, 214, 251, 255.

Question 94. What are these people LOOKING FOR? Surely not straight-line Chiropractic.

Answer 94. They come HERE to get what WE have, and then look elsewhere for something somebody else has. That seems to be human nature.

See No. 93.

Question 95. Can a misalignment in lower spine unlevel atlas and axis, thus making a subluxation of the latter easier to produce?

Answer 95. Subluxation of atlas is lack of correct RELATIONSHIP in position BETWEEN occiput, atlas, and axis. It might be “unlevel” but this would not cause a subluxation. Only concussion of foces could or would PROduce subluxation between occiput, atlas, and axis. A “misalignment in lower spine” is NOT a concussion of forces, therefore IT could NOT PROduce a subluxation between occiput, atlas, and axis. This IS “straight-line Chiropractic thinking.” (See language of Question 94.)

See Nos. 95, 206, 226, 131, 158, 74, 97, 100, 119, 132, 173, 182, 189, 235, 242, 291, 26.

Question 96. Is the Palmer toggle recoil the latest in adjustic thrust, or is something more being developed?

Answer 96. See Answer 88, 126, 163, 168, 194, 195, 61, 66.

Question 97. Can there ever be nerve pressure in the sacrum or coccyx, and NOT be present in cervical region?

Answer 97. Yes, there can be nerve pressures in sacrum or coccyx IF there are fractures with dislocation of segments or splin-

ters. Such CAN BE without pressures in cervical region, but such occur only once in thousands of cases and probably will never occur in your practice. It is easy to raise negative or denial questions distantly removed from being sensible. This is one of that kind.

See Nos. 169, 79.

Question 98. Does Chiropractic have any limitations in normalizing the body and eliminating tissue pathology?

Answer 98. See Answer 85.

Question 99. Explain how a subluxation in same vertemere may produce a spastic paralysis in one case and a flaccid paralysis in another.

Answer 99. Steady flow of electricity produces steady flow of light. Spasmodic flow of electricity produces alternate flow of darkness AND light. No-flow of electricity produces steady flow of darkness. Same is similar to flow of mental impulse supply. Steady flow produces alternate contractions and relaxations as demanded and needed to meet necessities. Spasmodic flow produces series of spasmodic contractions. No-flow produces flaccid lack of contractions. There is no "SPASTIC paralysis" because being spastic is the opposite of paralysis.

Question 100. Can interference with transmission of nerve impulse exist anywhere in the body outside of the spinal column? If so, how is a Chiropractor to deal with it?

Answer 100. Yes, any place where there can be a fracture or dislocation it MAY squeeze nerve fibers between segments or splinters. But, as many specimens in our Osteological Laboratory prove, Innate will soon denude such osseous substances, build a new foramen into or thru the symphysis, and release that pressure. There is no other place where a similar condition can exist, as in spinal column. We must be mindful that bone is HARDEST substance in body; nerve structure is SOFTEST. In vertebral subluxations we have pressure of hardest on softest. Spinal cord and/or spinal nerves pass thru or have exits thru openings from which there is no escape from pressure if misalignment is great enough to constrict space sufficiently.

Question 101. Why are there some cases which have clear readings in cervical region, but carry some sort of chronic pain in dorsal or lumbar area, for years?

Answer 101. Acute subluxation produces acute condition. Chronic subluxation produces chronic condition. Terms "acute" and "chronic" are used in two ways: as to degree and as to time. An "acute" pain means a sharp pain. An "acute" condition means one standing a short time. "Chronic" is used same two ways. An adjustment, which takes but a moment to give, may be given at 12:00 noon. Post-check shows clear reading. "Chronic" condition is still present in "chronic" form. CAUSE has been removed. Condition still exists, altho beginning to ungrow. It may take "years" for this condition to completely recover.

Question 102. In your opinion, would an adjustment in lumbar region, FOLLOWED BY an atlas adjustment, be in order?

Answer 102. You can "adjust" only a subluxation with four elements present. Only place such DOES exist is in occipito-atlantal-axial area. This being so, there could be no "adjustment in lumbar region." All you could do in lumbar region would be to punch bones, doing no good in removing interferences which do not exist in that area. What is gained by giving ADJUSTMENT of atlas, which IS a subluxation, then punching bones in lumbar region where there IS NO SUBLUXATION? Why treat an effect — "adjustment in lumbar region" — first, and follow it by adjustment of cause — atlas adjustment? As well lock barn door after horse has been stolen.

Question 103. Last time we were with you, question was asked as to whether or not there is any connection between the neurocalometer pattern and the spinograph listing. You did not have time to answer this. Could you please tell us what you know about it?

Answer 103. "Neurocalometer pattern" is ONE thing, spinograph listing is another. One determines location and presence of interference, other lists position and direction of misalignment. Each has two elements, each being different from other. There is no "connection" except that both will be at same place. NCM "pattern" indicates location of interference. Spinograph "listing" indicates direction of distortion.

See Nos. 188, 196, 214.

Question 104. Statement has been made that a bent coccyx cannot be corrected by atlas or axis adjustment. To me, this cannot be true. Please give us correct answer.

Answer 104. A "bent coccyx" is usually produced by a fall on buttocks, DISLOCATING coccyx. There is no interference at

this place. Adjusting vertebral subluxation at atlas cannot correct dislocated coccyx. If, however, coccyx has been distorted in relation to sacrum, because of contractured muscles, which would be true of various other adaptative curves thruout length of spinal column, then adjustment at atlas would relax contractured muscles, contract prolapsed muscles, and permit coccyx to be restored to normal relation to sacrum.

Question 105. Innate Intelligence enters body at birth. It returns to Universal Intelligence at death. Because of afferent and efferent transmission between Educated Mind and Innate Brain, there should be some effect on Innate Brain.

If this is so, when Innate returns to Universal and, at a new birth, Innate is taken from Universal, is it possible for that Innate to have some part of a previous Educated influence absorbed with it?

This, in effect, gives one the impression of having done something before, because of seeming familiarity. Can this be so?

Answer 105. We do not grasp what was intended by this question. If it is meant that by "afferent and efferent transmission between Educated MIND and Innate BRAIN" there should be some abnormal manifestation in Innate BRAIN, then inference is wrong. As to whether or not Innate at any time absorbs anything from Educated during its period of existence in one span of living in a certain assemblage of matter, is questionable.

We would phrase the question another way: During one person's span of life, does his educated existence influence God in any way, to any extent? If this were so, it would be equivalent to saying that forty years of educated COULD influence forty million years of Innate or Universal Intelligence. Can inferior ever influence superior; lower add anything to higher intelligence?

Everything educated is, was given it by and from Innate; same as everything Innate is, was given it by and from Universal Intelligence.

Question 106. If a person were kept free of nerve pressure for his entire life, wouldn't he live much longer than 100 years, considering limitations of matter?

Answer 106. We suggest you read portions of THE BIGNESS OF THE FELLOW WITHIN, Vol. xxii, Palmer, 1949, wherein we discuss deposition of male and female substances from which a child is expanded. If there were no pressure or interference at any time during a person's life, then man would live so long as

there are reserve tissue cells to be expanded. When all tissue cellular centers are devoid of new cells to take the place of those we shed, then life would cease. How old this would be in years, no one knows. It undoubtedly would be longer than average person now lives, with sickness more rapidly eating up cells to overcome sickness and disease.

Question 107. By way of the "grape vine," I have heard that the research clinic here has the highest percentage of results of any in the world. Would you affirm or deny this report?

Answer 107. We affirm this "grape vine" report. Anybody who works from INTENTIONAL knowledge secures a much higher percentage of results in getting sick people well, than one who works under ACCIDENTAL percentage. Also, one who works from ability of correcting CAUSE has a much higher percentage of results than one who treats effects. One who works with constants knows better how to do things than one who flits from one variable to another. One who knows WHAT to do, HOW to do it, WHEN to do, and WHY to do, accomplishes far more of accurate value than one who works with endless complications of theories.

Question 108. Request you discuss retracing, insofar as return of primary symptoms and their severity are concerned.

Answer 108. See Nos. 91, 90.

Question 109. Due to trauma, a sacrum has become misaligned, with a resultant short leg. A double scoliosis has developed to compensate for the difference in length of two legs.

Head is tilted to throw maximal weight over median line of body, and there is a definite subluxation in upper cervical region.

When an adjustic thrust is given, neurocalograph records that pressure has cleared out, but adjustment does not seem to hold.

A weight to align itself in proximity to gravity is a Universal Law. Is not the recurring subluxation due to the misalignment of sacrum?

In this case, would it not be wise to give first aid manipulation in sacral region, and then adjust the upper cervical region? If not, why not?

Answer 109. We suggest you read and study an exhaustive research study of this subject, THE STORY OF ADAPTATIVE CURVES, in this book.

If by "trauma" is meant accident such as fracture of leg with over-riding sections, then we could have a "resultant short leg." But if by "trauma" is meant a vertebral subluxation, then you are wrong in your supposition. You assume trauma produces a short leg, which tilts head, which produces a subluxation. You have reversed sequence.

See Nos. 159, 185.

Question 110. What is relationship of Innate Intelligence to Universal Intelligence?

Answer 110. This is an easy question to ask and hard to answer. Man's education ASKS the question. Man's education is finite. Man's finite wants to know the answer to an infinite relationship between Innate and Universal Intelligence. If finite man KNEW the answer, his education would cease to be finite and would be infinite, itself. Moment he knew THAT answer, he would cease possessing finite education, his understanding would be infinite. Being infinite, he would not ASK the question because he would HAVE the answer. It is good that Infinite Wisdom has seen fit to place many of these answers beyond the ken of education. If education KNEW infinite answers, it would try to run and rule the universe, which would be chaos in the universe as today we have chaos in education.

See Nos. 46, 47, 105, 228, 46, 220.

Question 111. When does Innate Intelligence enter the body or take over the functions of the body?

Answer 111. Innate enters moment baby dependent body becomes independent. So long as babe is in uterus it is dependent upon mother Innate. Even after delivery and babe is still connected to mother body, it is still dependent. Moment umbilicus is cut and baby becomes independent unit, that moment Innate takes possession and takes over "the functions of the body."

See Nos. 25, 46, 47, 48.

Question 112. What intelligence controls the growth of a child before birth?

Answer 112. Innate of mother expands, develops, places, and manufactures cellular structure "before birth." See Answer 111.

Question 113. What relation, if any, exists between neurocalometer pattern and listing?

Answer 113. See Nos. 103, 188, 196, 214.

Question 114. There has been some disagreement among students on pattern work. Some claim there is always a break, and others seem to think the whole pattern isn't used. Please explain correct procedure in detail.

Answer 114. That there is "disagreement among students" on pattern work, or anything else, is always true. There are many differing degrees of correct understanding. If there is a SICK pattern then "there was always a break." If there is a HEALTH pattern, then there is now no sick pattern. The whole of the pattern is a part of the study of determining what that pattern is. In The B. J. Palmer Chiropractic Clinic, we always read from second dorsal superior, all of which is part of the pattern.

Question 115. Please explain the possible whereabouts of Innate in a body that has no brain or spinal cord.

Answer 115. Suggest you study THE STORY OF SMALL THINGS in this book. Who is to say there is no brain or spinal cord in a microbe, bacteria, or germ, merely because it is so small it cannot be seen even under microscope? That it lives is evidence of the existence of an Innate. Obviously, there is a medium through which it activates matter. We cannot conceive of "a natural normal composite body that has no brain or spinal cord."

Question 116. Why are HIO system and MERIC system incompatible; that is, why can't they be used simultaneously?

Answer 116. Specific system confines itself to adjusting proven subluxations. MERIC system was hypothecated on theory that WE THOT we knew where subluxations were. Later research proved that "meric system subluxations" were misalignments, NOT SUBLUXATIONS in fact. That is why they are incompatible. We ought to know, because both are children of our research. We must have reasons why we denied former work and affirm later conclusions.

See Nos. 95, 206, 226, 131, 158, 74, 97, 100, 119, 132, 173, 182, 189, 235, 242, 291, 26, 95.

Question 117. Why was the "break system" of ascertaining nerve interference discarded to be replaced by the "pattern system?"

Answer 117. Knowledge of break was and is A PART of pattern system. Every sick "pattern" has a "break reading." Every healthy "pattern" has no "break" reading. Pattern system is a broader application study of neurocalograph graphs.

Question 118. Do you believe that subluxations could or did exist in the Garden of Eden?

Answer 118. See No. 55.

Question 119. Some Chiropractors claim that primary nerve pressure can occur because of a bent coccyx, and that upper cervical work will clear anything on lower spine except this. Please discuss.

Answer 119. See Nos. 104, 158.

Question 120. Can a subluxation cause a so-called callous upon spinal cord meninges?

Answer 120. Vertebral subluxation offers resistance to normal quantity flow of mental impulse supply flowing thru a physical medium — nerves. That resistance sets up abnormal heat at point of resistance. Heat expands structure. Structure involved is bone as well as soft tissues — meningeal structures surrounding spinal cord. As structure expands, swells, it crowds back against bone non-yielding frame. When that crowds as far as possible, it now squeezes back into neural canal and eventually constricts spinal cord in neural canal. Cervical area has rotary motion which produces friction on soft tender meninges. This sets up pain. To alleviate this, Innate builds callous at point or points of frictional rubbing. This creates secondary pressure with secondary interference. Assuming this case goes to a Chiropractor who knows where, when, and how to adjust MECHANICAL subluxated pressure, from then on MECHANICAL pressure with ITS resistance has been corrected. From then on, we have a SECONDARY cicatricial pressure. As soon as aware that first pressure has been removed, Innate will begin to break down callous material and eventually remove THAT pressure. An example is: assuming soft hands do manual labor. Friction of shovel-handle against soft skin will soon build callous material on all points rubbed against. If individual ceases manual labor, callous will be denuded and removed by Innate.

Same is true with frictional callous on spinal cord. This happens more prominently in cases of so-called infantile paralysis, poliomyelitis. In such cases, and they are examples only, MECHANICAL pressure has been corrected but case does not show ANY improvement. Question arises, why? There is no sick pattern, no pressure, no interference. It might take weeks or months for Innate to remove CALLOUSED PRESSURE, but day WILL come when Innate breaks down last connecting constricting callous tissue; and, as soon as THAT occurs, case will make rapid improvement. Instead of being discouraged, giving up hope of being of service to these cases, one should be patient and permit Innate to do her work

in her own way, if, as, and when she sees fit. We have ONE way of knowing when one is corrected and other exists, viz., intelligent and efficient use of electroencephaloneuromyograph. This measures and proves absence of one and presence of other.

Question 121. My studies and interpretation of Chiropractic philosophy leave me to surmise that the possibility of a vertebral subluxation is the one and only mistake Universal Intelligence made when it designed and built the first human body. Since this Universal knowledge and Universal Intelligence is so all-powerful and ultra-intelligent, will you explain to me why or how it made this one error in human anatomy?

Answer 121. It is our belief, which we cannot prove, that man as he is today is the product of an evolutionary process from quadruped walking on four legs, thru to ape family, thru to man who now stands upright walking on two legs with arms as auxiliary front legs. Man is still in process of adapting himself in rebuilding structures from one form to other. Greatest needed change is in occipito-atlantal-axial area. Instead of head being horizontal and supported accordingly, he is now perpendicular and has not yet rebuilt all structures to meet that change. If this is what has taken place, it is not safe to say that Universal Intelligence has made one grand and great mistake "when it designed and built the FIRST human body." Universal Intelligence and Innate do NOT make mistakes, but they do conform adaptations to changes educated man has seen fit to change himself from one form to another, even tho today those adaptations are not finished.

Question 122. It is true that muscles and ligaments are attached or inserted on the tubercles of bone and on the vertebrae. Is it possible that spasmodic contraction of these muscles could subluxate a vertebra?

Answer 122. Attached to bones are ligaments. Ligaments are attached to muscles. Both ends of a muscle are attached to ligaments which are attached to one or more bones. Muscles cannot contract and relax or become contracted or prolapsed. Muscular supply. In ratio as that quantity is or is not supplied, so do muscles contract and relax or become contracted or prolapsed. Muscular contracture is a prolonged contraction. Muscular prolapsus is prolonged relaxation. No abnormality can occur in any musculature, thereby affecting lengthening or shortening of attachments of ligaments to bone, except thru mental impulse supply. Supply of mental impulse depends upon whether or not there is a vertebral subluxation. Subluxation is primary. "Spasmodic contraction of these muscles" is an effect, a functional disorder, and is secondary.

Question 123. Please explain why an afferent nerve cannot become impinged.

Answer 123. See Nos. 54, 62, 72, and 75, 123, 202, 261.

Question 124. Does a subluxation cause pressure upon spinal cord — the nerves emitting thru the intervertebral foramen in atlas-axis region, or both, when the upper extremities are involved?

Answer 124. Vertebral subluxation causes pressure upon spinal cord, upon nerves emitting thru intervertebral foramen, in atlas-axis region, for ALL conditions not only in "upper extremities" but ENTIRE body. In so stating, remember that pressure is ALWAYS BETWEEN vertebrae. As atlas shifts right or left, it distorts relative space between INFERIOR of occiput and SUPERIOR of atlas; or BETWEEN INFERIOR of atlas and SUPERIOR of axis. Take two vertebrae, look down THRU neural canal, shift one vertebra to right or left, and note what it does to intervertebral space BETWEEN, and you will see what we mean.

Question 125. Since D. D. Palmer was the discoverer and you the developer of Chiropractic, is it not possible for you to obtain a patent or copyright on the word "Chiropractic" — thus making it illegal for those in the field who do not stick to the true principle of the manipulation of the vertebral segments for the removal of nerve pressure?

If these people wish to use modalities, why should they have the right to call themselves Chiropractors?

Answer 125. Patents and copyrights are issued only on new mechanical movements of machinery; or some new arrangement of a new series of words. There could be no patent or copyright on ONE word. It could be trade-marked IF the one word were set up in a certain style of lettering, or in combination with a particular coloring. "Coca-Cola" is a good example of a trademark. "The Chiropractic Fountain Head" and "The Palmer School of Chiropractic" as set in certain hobo type IS trade-marked. Other than that, there is no way of restricting use of term "Chiropractic" or "Chiropractor."

See No. 226.

Question 126. Where is the research work carrying us as a "next step" in the application of the Chiropractic principle?

Answer 126. See Nos. 50, 88, 163, 20.

Question 127. In specific work, if you get results quickly patients

are reluctant to continue service, due to cost. If you don't perform a miracle on first adjustment, patient claims it doesn't work. If you demand money in advance, patient thinks you're out to hook him. What is the formula for successful specific work?

Answer 127. Formula for successful work of any kind, where you deal with anybody on any subject, is to educate them to what you are doing, why you do it, how you do it, and why you do not do anything else. If YOU are sold to specific work, **SELL THE OTHER FELLOW** as you sold yourself. Once people know **WHY** you do as you do, they will see it in same light you do, IF you are sold to that fact. Literature helps very much. Word-of-mouth intelligently told is better still.

Question 128. Are you familiar with John Grostic's work? If so, what is your honest opinion of it?

Answer 128. Yes! If any other idea, theory, or hypothesis were a workable fact and better than that which we have researched here and proved to be right, we would use it and teach it. We do not question sincerity or honesty of men with other ideas. We do, however, question judgments, knowledge, and experience. They have much to learn which we passed thru years ago. They are on the way up above many others, but away down below where we are now. If you check on trend of all this so-called research of recent years, Truscott, Grostic, microdynameter, you will observe all, with hardly an exception, are coming to specific atlas and/or axis area. This proves they are coming to work we went thru years ago, to reach that end. Give them more time, more thinking, more application, they will eventually agree to where **WE** are today. Time is a great leveler of issues, disproving much and proving much else. We sometimes get impatient for time to prove its truths, but time tells!

See Nos. 93, 306.

Question 129. How would you adjust an anterior third cervical when it is the major?

Answer 129. Inasmuch as there is no such thing as "an anterior third cervical" except as it may be dislocated, we would not be concerned, because it is not a vertebral subluxation.

Question 130. Explain why drugs of stimulating dilitation effect the atlas and axis more than any other.

Answer 130. The premise in this question is not true to fact. Drugs, whether stimulative or inhibitive, do not affect "atlas and axis" whether normal or subluxated. They do affect mental im-

pulse supply by inducing blocking process of that force flow between brain and body or body and brain. It is possible that, "atlas and axis" being causative factor of dis-ease, it makes it more noticeable to patient because that is point of resistance.

Question 131. In event of a sacro iliac slip or a lumbo sacral slip, do you advise other than a cervical adjustment?

Answer 131. Adjustments on atlas or axis have many times proved to be correct thing in relieving what is often called "a sacro-iliac slip" or a "lumbo-sacral slip." Nothing more need be done than to secure accurate and correct listing of atlas or axis and adjust it at right time, in right way, and results will follow.

Question 132. If there is no nerve impingement at any point except atlas or axis, why will a dorsal adjustment relieve an intercostal neuritis?

Answer 132. See Nos. 14, 26, 74, 80, 97, 101, 102, 109, 131, 179, 182, 189.

Question 133. How do you determine low right anteriority of atlas?

Answer 133. We don't. As atlas side-slips, it goes up and off condyle. In so doing, it goes either anterior or posterior — usually anterior — and right or left. We don't understand term "LOW right anteriority of atlas." It is HIGH right, etc.

Question 134. Do you believe hard or light thrust is best for the adjustment? Some seem to use very hard thrust; some use a thrust so light you could believe no more than mere contact was made.

Answer 134. This perennial question constantly bobs up. How hard, how light? Entire question is one of invasion and resistance. If patient resists, there must be more invasion to overcome it. If patient has little resistance, it takes less invasion. Patient should be relaxed; this means less resistance. How much IS resistance, or how much IS invasion, must be sensed by the Chiropractor. As his hands contact skin, he should be able to SENSE, and invade accordingly. How much IS resistance cannot be gauged by pounds, nor can one tell another, nor can he get it from books, sitting in class listening to lectures. It is like "tact" and "judgment" — either you have it or you don't.

To illustrate: A woman in a hotel, taking her bath in bathtub, phoned down for ice water. When bellboy knocked on door, she

said, "Come in," which he did. He looked and said: "Did you ring for ice water, SIR?" That's tact!

Question 135. If you had the authority, would you enact laws confining Chiropractic to the atlantal-axial region?

Answer 135. No! Compulsion is worst method of trying to secure cooperation. Education is best means, altho much slower.

Question 136. What do you think about personalized advertising, such as telephone book, newspaper, radio, etc. (provided, of course, the person in question is a Chiropractor and not a Chiropractoid?)

Answer 136. We believe in advertising Chiropractic first, then the person, then the school from which he graduated, assuming he is proud of the fact. Any medium of publicity is good — some better than others. We believe in advertising and public relations, so long as any, every, and all means used are true and truthful. Here and there are groups from OTHER schools who resent a PSC graduate advertising "Graduate, The Palmer School of Chiropractic." They try to pass restrictive measures to prevent any PSC graduate doing this. There is no objection to HIS doing THE SAME regarding HIS school; but the fellow who resents a PSC graduate from advertising THAT fact is usually ashamed or embarrassed re HIS school, therefore tries to place himself up on PSC level, by bringing PSC graduate down to his level. CHIROPRACTIC EDUCATOR prints testimonials. The PSC issues a series of DISEASE TRACTS. THE CHIROPRACTOR MAGAZINE published by The PSC is an excellent medium for reception room table. The ICA has a series of transcriptions for FIVE-MINUTE RADIO TALKS. Public lectures are excellent, providing speaker knows what he is talking about, is sincere and honest in what he says, and convinces listeners. The B. J. Palmer Chiropractic Clinic issues a wonderful CLINIC BROCHURE which is yours for asking. Hundreds of Chiropractors have them on reception room tables. They cost us \$3 each (remit that if you wish). An excellent practice builder is to send ALL problem cases to The BJP Chiropractic Clinic. They return home and become your best boosters. They will bring more business than any person you have. Why? While here, we educate them TO Chiropractic. American Bureau of Chiropractic auxiliary movement is very worth while means of gaining patient support. It is affiliated with the ICA. Write ICA for information.

Question 137. Is it possible that lack of cartilage between atlas and condyle, or atlas and axis, can cause cord or nerve pressure? If so, how frequently?

Answer 137. This RARELY happens. It occurs so seldom that you can dismiss it from serious consideration.

Question 138. Why is it that an axis PRI can be adjusted, patient gets better, but X-ray of axis shows no change?

Answer 138. Average Chiropractor has ordinary X-ray equipment. It is good and takes good pictures, but does not permit posture-constant so that subsequent sets are comparative for graphing purposes. In The B. J. Palmer Chiropractic Clinic, we use exclusively a posture-constant, records being made and kept, which permits our taking one or more subsequent sets which ARE comparable to each other, so we can graph them laying one over other and thus PROVE changes made in mal-position to normal position.

Average Chiropractor takes one set of pictures one day, and several weeks later takes another set; both sets taken WITHOUT posture-constant. Hence, he cannot compare them. He places both sets in view boxes, looks, and sees little if any change. It shows how deceptive the eye is when two sets are taken at different times under different postures. Our sets DO show changes.

Question 139. What holds atlas out of place, once subluxated? If muscles, would releasing tension adjust the vertebra?

Answer 139. Nothing holds a subluxated vertebra "out of place." Being "out of place" it stays there, like a dislocation, because of torque twist which does not permit it to re-adjust itself. In a torque twist, you can relax muscles, any, every, and all ways you care to — be it thermal, manipulative — and vertebra will not adjust itself. Only torque adjustment WILL correct it. Let us rephrase this question. "What holds" a fracture or dislocation "out of place", once fractured or dislocated? "If muscles, would releasing tension adjust the vertebra?" It took VIOLENT concussion of forces to PRODUCE fracture or dislocation. It will take same reversed to "set" either. Can one imagine somebody using two fingers, touching lightly, with hardly enough pressure to crush a ripe grape, to set fracture or dislocation? Why difference with subluxation, all being PRODUCED same way, it being but a matter of degree of violence between any one of the three.

Question 140. In your experience, what has been the result of Chiropractic and its effect on syphilis?

Answer 140. For many and varied reasons, we do not knowingly take cases diagnosed "syphilis". In Iowa, we are compelled to report such to local health authorities who insist upon those cases going to an M.D. and taking "shots." Also, there is the fact that such

cases smell, which is not pleasant for other patients. If it becomes known, and it usually does, other patients fear smears on clothing, toilets, etc., and it drives business from one's office. Chiropractors who DO take such cases, report good results.

See Nos. 34, 64, 68, 77, 65, 167.

Question 141. In research report coming out, will there be case reports on children?

Answer 141. Our research publications do list cases from infants to aged. Our research is based on cases as they come to us.

There are two ways to "research" methods of restoration of health to sick people. Here is way one national association does it: They write Chiropractors, ask them what results they have had on a certain disease. They get back a few scattered reports — some reliable, some doubtful, some unreliable. Many of these Chiropractors do not diagnose but rely upon what patient tells them physician said — which is not reliable. Many reports come from Chiropractors who use differing systems, various diagnostic machines, adjust many places many ways. Out of this conglomeration, there is no conclusion of fact except, "I had two cases; one got well, other didn't." Association now reports, "Fifty per cent got well." If this Association were called upon to PROVE reports, they would be caught worse than a rat in a trap.

In The B. J. Palmer Chiropractic Clinic which was scientifically organized in 1935 to conduct scientific research, we started with two approaches: medical, with medical men in charge, with a more complete medical laboratory equipment than most medical clinics. All data were automatically and mechanically recorded or graphed. Nothing was trusted to memory. All was a matter of record.

In The B. J. Palmer Chiropractic Clinic which was scientifically organized in 1935 to conduct scientific research, we established a complete Chiropractic approach, containing all responsible equipment to prove our Chiropractic principle and practice, including some equipment not found anywhere else in the world. All data were automatically and mechanically recorded or graphed. Nothing was trusted to memory. All was a matter of record.

Elaborate and exhaustive case files were established. It takes 128 printed forms to establish our facts on cases. This system was augmented with an EXCLUSIVE approach — only method by which it becomes scientific. Staff of this Clinic alone has 32 experts — each to his own. Case files were catalogued from Case No. 1 to date.

In 1949, we established a clinical research staff of four people, with an expert analyst and researcher in charge. They have been

and are now breaking down all cases data into individual books, each to its subject. It will be several years before this work is completed.

When each subject is compiled, it is printed in separate book. If, as, and when any body of scientists wishes to verify these reports and this data, every case upon which report is based is subject to 100 per cent verification. Records are kept ON CASES UPON WHICH REPORTS ARE BASED. Regardless of who might investigate, there will not be ANY question as to accuracy of our facts. You can understand how confident we are in publishing same. WHAT was done, WHERE it was done, WHEN it was done, HOW it was done, WHY it was done, on WHICH CASE it was done, dates, names, addresses, figures — ALL are in the record. NO guess-work — STUBBORN FACTS!

Some day, some one is going to challenge work of both of these organizations. Will somebody's face be red when that comes!

Question 142. What is Chiropractic explanation of so-called spastic? Is it due to a brain or cord disturbance?

Answer 142. See Answer 99, 77, 142, 201.

Question 143. Would you ever adjust an RAS atlas (with axis spinous right) by taking contact on left side of atlas?

Answer 143. Decidedly and emphatically NO! If atlas is side-slipped R, to adjust from L would make it worse.

Question 144. When atlas is superior on right side, which way does the head lean?

Answer 144. With atlas side-slipped to R, head would lean to left. Cervical adaptative curve would be to right, dorsal adaptative curve would be to left, lumbar adaptative curve would be to right, right ilium would be adaptatively high, left leg would be adaptatively "long." Reverse of this would be true if atlas were side-slipped L.

See The Story of ADAPTATIVE CURVES. Also Answers 159, 185, 109.

Question 145. Please stress importance of X-ray over palpation.

Answer 145. This question asks us to stress certain methods over others. We do not follow orders. We follow reason, logic, and facts. No person is competent to palpate, on outside of skin, what is underneath which cannot be seen or palpated. Any conclusion

based on palpation is usually in error. Only spinograph which pictures WHAT IS inside can accurately reveal what IS INSIDE. The PSC was first Chiropractic institution to introduce X-ray in its research study. It was done originally to establish proof of existence of vertebral subluxation. Later, checking, we found palpation did not agree with what spinograph revealed. We found very high percentage of errors.

Question 146. In what way does the additional adjustment help PRODUCE a block?

Answer 146. We like to answer questions—but how can we when many are inconsistent, untrue to any problem. Take this question, for instance. What is meant by an “ADDITIONAL adjustment”. It either is or is not such. How can any ADJUSTMENT produce a block of any kind? On reverse, it unblocks a block.

Question 147. Can one use the neurocalograph accurately without the neurotempometer?

Answer 147. What any Chiropractor uses, depends upon two phases: 1st, whether he uses it to impress a patient and thereby fakes conclusion; 2nd, whether he uses it to be accurate and reliable to seek conclusions of fact to help him to be of greater service in getting sick people well. There are Chiropractors who do both. If he uses neurocalometer he is better off than if he used meric system. If he uses neurocalometer and neurocalograph, in conjunction, he is better off than if he used neurocalometer alone. If he uses neurotempometer in conjunction with neurocalograph, in conjunction with neurocalometer, he is better off than if he used only neurocalometer with neurocalograph. In The B. J. Palmer Chiropractic Clinic, we use all three and wouldn't run our Clinic without them. This accounts for three reasons WHY worse cases get well quicker than ever before in our history. There are many other reasons, also.

Question 148. Can atlas rotate without side-slipping?

Answer 148. No! See Answer 151.

Question 149. Have a patient with ASL atlas, with a variable axis PRI body actually right. What is the contact?

Answer 149. See leaflet on this subject. Never adjust an axis in a variable. Always adjust atlas in a variable. With atlas ASL,

adjustment would be FROM left. Contact is on transverse process of atlas.

See No. 148.

Question 150. Would you explain the false listings, such as false PRI?

Answer 150. Do not know what is referred to here as "false". It either is or it isn't. There is no true or "false PRI."

See Nos. 148, 149.

Question 151. Can there be any rotation of atlas alone without laterality?

Answer 151. No!

See Nos. 148, 149, 150.

Question 152. Is the posterior arch contact of any value in anteriority?

Answer 152. No!

See Nos. 148, 149, 151.

Question 153. Two years ago, some comment was made at The PSC concerning relation between neurocalometer break readings and X-ray listing of laterality. Please explain.

Answer 153. See Nos. 103, 113, 188, 196, 214.

Question 154. What is the result of your research on use of the Ellis microdynameter?

Answer 154. See Nos. 11, 40, 44, 237, 243, 172, 157, 215.

Question 155. What is the sensitivity of the neurocalometer as compared to the neurocalograph?

Answer 155. Sensitivity of reading resistance heat is in neurocalometer. There is no sensitivity of reading resistance heat in neurocalograph. All neurocalograph does is to graph readings. They are synchronized as to speed of travel — one with other.

Question 156. Why adjust atlas as major instead of axis, when both have listing in same direction?

Answer 156. Because atlas is one subluxated. See SPECIFIC SUBLUXATIONS — CONSTANTS AND VARIABLES, Vol. XXIII, Palmer, 1950.

Question 157. Are all electro-chemical imbalances of the human body economy correctible by proper mechanical alignment of upper cervical area?

Answer 157. See Nos. 98, 237, 243, 172, 215, 11, 40, 44, 154, 98.

Question 158. If coccyx is bent, according to X-ray, would atlas or axis correct it and release pain in rectum?

Answer 158. See Nos. 104, 119.

Question 159. What is the value of basic technique?

Answer 159. See Nos. 109, 185.

Question 160. How would you adjust an anterior atlas if trans-
verses are obscured by low mastoids? Can it be done on side-posture
table?

Answer 160. Yes. We have yet to find any atlas subluxation we could not adjust from and on transverse process. We do not alibi incompetence but we do perfect ourselves so we can. Ultra-rapid motion pictures of a hammer driving a nail into a board, when shown slowed-down, prove, so long as hammer head is in ACTUAL CONTACT with nail head nail does NOT go down into board. Split second hammer head RISES from contact with nail head, nail goes DOWN into board. That which is transferred FROM hammer TO nail is force — invasion of force from hammer to nail and resistance of nail into board which has been overcome by transference OF ENERGY from hammer TO nail. Same is true of pile driver. When hammer drops, it transfers force, energy, power to the pile. As pile driver RAISES, pile LOWERS. Same principle is applicable to adjusting vertebral subluxation. As hammer head of hammer hand delivers force TO vertebra, it transfers invading force TO subluxated vertebra. Subluxated vertebra absorbs force and moves vertebra. This idea that one can "kiss" vertebra with a feather touch is inconsistent with all mechanics. Imagine hammer lighting upon nail with feather-like touch and moving nail into board. Imagine pile-driver kissing log pile and driving it into ground. Energies have directional value according to directional value of invading force. When done correctly, arm delivery can be given directional torque value that reaches UNDER mastoid and corrects its position. Giving directional torque value to adjustive torque movement is much like directional torque value billiard player uses on cue to cue ball in making three-shot billiards. Or, he can give it "english" and pull ball back towards his cue shot.

See Nos. 151, 148, 149, 150, 162.

Question 161. How will passage of the proposed socialized medicine bill before Congress affect Chiropractors?

Answer 161. Doctors and patients will become machines to be ground out like sausage links. Individual initiative will not exist. People will line up like people going to a movie, waiting to buy a chance at getting a series of forms to be filled in. D.C. will spend time signing forms galore. Income will be doled out at so much per. Office will be so crowded with rich and poor; sick, half-sick, and not sick at all, that he will have no time or inclination to progress with our development. He will become a cog in a national grinding organization. Costs of maintaining government will grow mountain-high, taxes will climb out of all proportion to value. Chiropractor will have one door on right where patients enter; an office in between where he will slap them down on table, slam-bang a punch or two on their backbone, and shove them out thru door on left. He will keep this up as fast and as long as endurance lasts, stopping between backbone punches to sign many forms for each patient, and, at the end of day, will retire dead tired; at end of each month getting little or no pay for strenuous efforts. Cost to consumer will come out of his pocket, only difference being that instead of having doctor of his choice, he will take whoever government assigns. Instead of paying doctor direct for services, he will make out forms, pay the government who will send him to doctor they choose, who will make out many forms, whom the government pays.

No matter how many corners everybody is compelled to twist around, patient pays, and pays, and pays, and in long run pays more under government supervision than he would if he paid direct.

Yes, doctors' offices will remind us of a human packing plant where pigs come in, are placed on a hook, squealing, throats are stuck. Doctor becomes pig-sticker, blood is drained, patient is quartered, and eventually becomes so much pork for undertaker.

Individual initiative has always improved service. Government control always decreases it. We are professionally opposed to any national health legislation. The I.C.A. says IF such a bill IS to pass, we want Chiropractors INCLUDED on a common par with physicians. We can see several SUPREME advantages if this plan goes into effect. It will cut down materially all fol-de-rols of physicians with which they today mystify sick yokels. They will have no time to hunt germs, take useless lab tests; no time to diagnose cases after many days' visits. They will do much like army medics: reduce all medication to one brown pill, one white pill, to all people alike, regardless of what they might have, if they know what it is.

It will have another advantage to the Chiropractor: it will stop him from drifting into the same hocus-pocus methods. It will simplify approach to necessities of spinographing one area only, using neurocalometer exclusively, adjusting only when interference pattern is known to exist. Visits of patients will be fewer and farther between, preventing over-adjusting cases. Professionally, this kind of legislation would be to advantage of patient in all respects, and to disadvantage of doctor in all respects.

It will open issue of sick people to political boon-doggling, pork-barrel methods, giving employment to hundreds of thousands of political aspirants; political appointees, who will get salaries out of proportion with what they do or are worth, piling up costs, piling up millions of forms to account for every move of hundreds of thousands of all kinds of doctors, keeping records on 150,000,000 people. It will be another regimentation of people wherein control of individual action will be massed in Washington. It will make political slaves of the sick, depriving them of the right of the doctor or method of their choice.

Question 162. The adjustment is all-important. Please discuss elements of a good adjustic thrust and give us some advice on HOW TO ATTAIN IT.

Answer 162. Accidents are SUDDEN concussion shocks. Concussion of forces is a study of taking Innate unawares, when body is relaxed. Application of external invasion is toggle torque recoil blow. To toggle is to use a double joint action, wherein little force is stepped up, geometrically to deliver much work. Torque is a three-direction twist or wrench. Recoil is application of speed which increases cleavage by reducing resistance of movement between three physical vertebrae closely tied together. Adjustment process is its exact opposite — the reversal. We place patient on side-posture table to produce maximum relaxation. This reduces resistance on patient's part and makes less force necessary for invasion on part of Chiropractor. He uses two arms which form the toggle joint between elbows and wrists. By twisting arms and wrists he injects into motion the three-direction torque twist which untorques the subluxation torque. By bringing elbows quickly together, thus lengthening line between episternal notch of neck and vertebral transverse or spinous process, he forces delivery below in a quick action. If done correctly, approach is everything. He will not need pull hands from back — they will automatically spring off. When they do, shoulders will automatically drop. It is all a question of mechanics in intelligent use of forces.

Best Chiropractic adjusters are those who know three studies

and apply them intelligently: electricity, to know how electricity flows thru physical mediums; billiards, to know how to make three-angle shots; punching bag, which gives that perfect swing of shoulders, elbows, and hands, in approach and get-away. These three combined are vital in development of individual to deliver perfect adjustment.

See Nos. 151, 148, 149, 150, 151, 88, 126, 163, 168, 194, 195, 96, 66, 61.

Question 163. Please give us an inkling, at least, of all you know about Chiropractic but haven't told yet.

Answer 163. See Nos. 50, 88, 126, 20.

Question 164. How would you determine a major?

Answer 164. Four elements **MUST** be present with every vertebral subluxation — two concrete, two abstract: There must be a misalignment **BETWEEN** three vertebrae, with occlusion between them. There must be pressure upon nerves and interference to normal quantity flow of mental impulse supply. First two are proved by spinograph; last two, with neurocalometer. Major is determined by proving location, direction, presence of pressure and reduction to nerve force flow. It takes a combination conclusion of use of two precision instruments to prove the answer. Major would be **THAT** vertebra which was greater in misalignment than its co-respondents above and below.

Question 165. Will you discuss "that extra something"?

Answer 165. That "extra something with staying put value" is that Innate judgment a Chiropractor possesses and **MUST** use to **KNOW** when, where, why, and how to locate and adjust vertebral subluxation, and to know when to stop. Judgment is much like tact — either you have it or you don't; you develop it, or you don't; you want it, or you don't care. This is something one cannot read in books, get in class rooms, which a 4-years-of-9 does not produce. Sometimes, so-called "ignorant" people have it, superexcellent; other so-called "highly educated" never get it because they know so much that isn't so that they deny their internal thinking values by preference.

Chiropractors spend thousands of dollars, thousands of hours, much thinking and labor to perfect themselves to know **HOW**, **WHERE**, **WHEN**, **AND WHY** to give adjustment, to set a vertebra into normal alignment to get sick people well, and **NEVER** spend one dollar, one hour, one thot, or any action **TO KEEP IT IN POSITION**. Patients must be taught to be "neck conscious"

AFTER adjustment. They must be taught how to sleep to take off strains and twists. They must be told not to struggle, twist, or squirm after adjustment when they put on dresses over their heads, get into girdles, etc. They need instruction about not running for street-car, watching slips and falls on icy sidewalks. After every adjustment, Chiropractor should provide ample silent rest rooms, requiring not less than three hours' relaxation to permit subluxation "to seat" itself so it will remain fixed. Patient will contend he "hasn't time." If so, he hasn't time TO GET WELL. Chiropractor will contend "it costs too much" to rent space devoted to that purpose. This is another reason WHY The B. J. Palmer Chiropractic Clinic is getting quicker results on worse cases than ever before. WE DO WHAT WE ADVOCATE.

Question 166. Could you tell us the amount of depth that should be put into an adjustment?

Answer 166. See Nos. 134, 168, 198.

Question 167. Would you discuss the condition of anencephaly in relation to our Chiropractic philosophy?

Answer 167. We can conceive of no normal, natural composite being without such. Even to smallest organizations there is such. See Nos. 64, 65.

Question 168. I have heard the term "kiss adjustment". What is your philosophy on this point?

Answer 168. "Kiss adjustment" is exactly what it indicates. A kiss on the lips is merely a touching of lips to lips, a tissue-paper contact. This would never REDUCE a vertebral subluxation. There must be a follow thru. Imagine a golfer, tennis player, baseball man at bat, or any other game where force must be delivered to object driven from here to there; suppose he came down with his driver, tennis racket, baseball bat, and merely "kissed" the ball. How far would he get it from where it was to where he wants to put it? It is that characteristic "sock" that carries it to its objective. Can you imagine a professional prizefighter, reaching out and merely "kissing" his opponent's chin? Would he ever win a "KO" or a "TKO" with that kind of blow? It is that short jab that delivers force, that wins. Same is true with adjustment.

See Nos. 151, 148, 149, 150, 151, 162.

Question 169. Please explain why direct pressure to spinal cord is stressed, rather than pressure to spinal nerves in occipito-atlantal-axial region?

Answer 169. See Nos. 75, 79, 97, 100, 119, 123, 124, 132, 169, 79, 97.

Question 170. The neurocalometer measures difference of heat produced by nerves on each side of neck. **THIS NERVE PRESSURE PRODUCES A SUBLUXATION** and, in turn, disease. Actually, the subluxation produces a muscle tension.

I want to know if it is the difference of heat of these tense muscles, due to nerve pressure, that we measure; or is it definitely the difference of heat in the nerve?

Answer 170. Your premise is inaccurate. Your first sentence is true. When you say, "This nerve pressure **PRODUCES** a subluxation", you have issue reversed. It is **SUBLUXATION** which produces nerve pressure. When you say, "This nerve pressure produces a subluxation and, in turn, disease", you are again wrong. Subluxation produces nerve pressure which, in turn, produces disease. What you read with neurocalometer is differential between resistance heats "on each side of neck."

Question 171. If Chiropractic is location and removal of nerve interference, and we can do that now with X-ray and neurocalometer and toggle recoil, what are the new possibilities or improvements in the application of the Chiropractic principle?

Answer 171. See Nos. 50, 88, 126, 163, 20.

Question 172. Is there any merit in the microdynameter? I have heard pro and con.

Answer 172. See Nos. 11, 40, 44, 154, 98, 237, 243, 172, 157, 215.

Question 173. Would you give us your interpretation of why there would be no subluxation or nerve pressure in lower spine when an occlusion or misalignment shows in spinograph? If the neural canal is decreased in diameter in cervicals and causes pressure, why would not this same condition exist in the dorsals?

Answer 173. Study of neurology shows sum total of all fibres gather at and between superior of axis and inferior of atlas; between superior of atlas and inferior of occiput. As spinal cord proceeds inferiorly, it is desiccating fibres, constantly getting smaller until it finally ends in "cauda equina" at approximately second lumbar. Study of vertebral column shows spinal or neural canal is smallest at occipito-atlantal-axial area and largest as it continues inferiorly. Same analogy is true of intervertebral foramina. Larger the cord, smaller the canal; smaller the cord, larger the canal and intervertebral foramina. Furthermore, all vertebrae

beginning at inferior of axis and continuing down, are interosseously locked against any primary direction, such as posterior, anterior, left or right. This is not true at occipito-atlantal-axial area. For proof of these facts, see THE SUBLUXATION SPECIFIC, THE ADJUSTMENT SPECIFIC, Vol. XVIII, Palmer, 1934.

Question 174. When there is an absence of an interference pattern in cervical region, but a definite pattern in lower spine, would that tend to prove that the nerve impinged is "hot" all the way from the point of impingement to its peripheral ending?

Answer 174. Premise here is wrong. If there is a "definite pattern in lower spine", indicating "that the nerve impinged is 'hot' all the way from the point of impingement" then there WILL BE an "interference pattern" IN cervical region. It is impossible to have one unless we have the other. Using appendicitis as example: We do know clinical thermometer placed in appendix might register 104°. If neurocalometer is placed PERPENDICULARLY, one terminal on nerve leading from there to exit from spinal column, other terminal OFF that fiber, and tracing of heat record is made from appendix TO spinal column, THAT nerve will be found hot all the way FROM appendix TO spinal column. Adjustment given at place of resistance — atlas or axis area — will reduce heat FROM spinal column TO appendix. Is that fiber, or those fibers, hot FROM spinal column up to atlas or axis area IN SPINAL CORD? We know of no way of proving this except with 'timpograph and then we measure quantity flow by this instrument — not heat.

Question 175. Explain why ninety per cent of National School graduates pass the Iowa Basic Science exam and only three per cent of PSC graduates pass.

Answer 175. This statement, like many others, is not true to fact. We are all prone to listen to idle gossip and assume, because told, it is true. Investigation would correct false rumors purposely told to misrepresent, especially from source from which it originates.

Question 176. I am going into practice with a meric Chiropractor. What would be the result if I used specific — adjust only when necessary — and he adjusted at each visit, only below axis?

Answer 176. Assume two practitioners ARE in same office. Assume each has 100 cases, such as come regardless of diagnosis. Assume one uses specific work, other meric. Assume a definite period of time is studied on both groups of cases. Here is what you will find:

Specific work will get quicker results on worse cases than meric

work. Patients will compare results. It won't be long until ALL cases will desire specific service. It won't be long until there will be a yielding on part of meric practitioner in favor of specific; or, if he is jealous of his pride and opinion, he will resent specific work and specific man will be hunting for another office. It HAS happened that way many times, many places. If, however, meric man is interested in seeing worse cases get well quicker, he will honestly yield. See No. 304.

Question 177. Explain difference in care that a patient might receive in your Clinic and in your proposed Chiropractic hospital.

Answer 177. Let us compare care cases will receive in The B. J. Palmer Chiropractic Clinic Hospital, if, as, and when it WILL BE built, with the Spears hospital as it is now.

Spears advertises and uses some forty listed methods of treating disease, plus adjustments, mixing the two even to stretching machines, privy back-door practice, etc., which he advertises, sells, and uses.

In The B. J. Palmer Chiropractic Clinic Hospital-to-be, there will be **NOTHING USED** but **CHIROPRACTIC**—the ten-fingered, by-hand-only kind, using spinograph, neurocalometer, etc. Only specific work will be given on any case at any time. It is difference between where Spears gives patients anything they want, and The B. J. Palmer Chiropractic Clinic where **WE** will be the doctor and give only that which **WE** know will **GET CASE WELL**. Same service **NOW USED** in our Clinic will be used in The B. J. Palmer Chiropractic Hospital. We know sick people well enough to know they like to be fussed over and fooled with, have their backs rubbed and bellies tickled; tell about "my operation" and consume doctor's valuable time, reciting over and over their aches and pains. We also know sick people are tired of being sick **AND WANT TO GET WELL**. Spears begs for former; we want only latter. Chiropractic health homes and sanitariums are mostly what name implies. Some go in for anything and everything, but they are in minority.

See Nos. 241, 250.

Question 178. Is a healthy person one that is symptom-free or one that has no interference with life force? Explain health and sickness in relation to patterns that seem to indicate the opposite.

Answer 178. If a person "has no interference with life force" flow, he IS "symptom-free" and is healthy. Second half of this ques-

tion is contradictory to first half. If time element is not considered, then second half MIGHT be true.

Example: If case is chronic, long-standing, of serious degree, and vertebral subluxation is adjusted at 12:00 noon, then in one second of time THERE IS NO SUBLUXATION. Sick "patterns" now definitely "indicate the opposite", yet person is NOT well and possibly won't be for weeks, or months.

See Nos. 169, 79, 97, 169, 75, 100, 119, 123, 124.

Question 179. If germs are the scavengers of the body and feed only on dead or diseased tissue, how can a mass invasion of germs cause a disease unless one has a subluxation which has resulted in dead or diseased tissue?

Answer 179. Let us do straight-line thinking. First, you state "scavengers of the body **** feed only on dead or diseased tissue." This is true. "How can a mass invasion of germs cause a disease?" This contradicts first statement. Then you contradict both these by "UNLESS one has a subluxation which has resulted in dead or diseased tissue". This last is the Chiropractic fact. If last is true, then second is not. CAUSE is INTERNAL. It is NOT external. CAUSE is a vertebral subluxation with its sequences. It is NOT germs. If one IS, other ISN'T.

Question 180. What causes so many graduates of The PSC to fail in practice or to turn to other systems?

Answer 180. That such exists, we regrettably admit. However, percentage of failures is no greater in cross-section of our profession than that of medical men, preachers, dentists, osteopaths, merchants, or other cross-section of college or university graduates. Hundreds of Harvard grads are driving street cars in New York. Is this fault of school, its faculty, or subjects taught? If so, how about men who go to same school, same subjects, same faculty, and succeed? Success or failure is in the individual.

Question 181. Does the electroencephaloneuromentimpograph tell you the point of impingement or the listing?

Answer 181. It tells location and degree of interference. It does not give listing for adjustment.

Question 182. Do you consider it possible for a vertebra to be subluxated below atlas or axis without either of these cervicals being subluxated; not referring to adaptative curvatures but to a

definite misalignment of a single vertebra. Also, would there be any resulting nerve pressure from such a misalignment?

Answer 182. See first statement in Answer 179. There is no possibility of a vertebral subluxation BELOW axis. There can be and usually are "definite misalignments" of various and many vertebrae below axis. There would be no pressure or interference from vertebral misalignments inferior to axis.

See Nos. 14, 26, 43, 74, 80, 93, 95, 97, 101, 102, 109, 119, 129, 158, 173, 174, 131, 179.

Question 183. Drug houses educate the public to medicine; why do not Chiropractic supply houses educate the public to Chiropractic?

Answer 183. Chiropractic is new compared with medicine — one of 55 years as against other of 5,000 years. Being new, Chiropractic had to go thru development and research, all of which is expensive. Development of equipment has gone thru many changes, all of which eat money. Drugs and drug houses have gone thru that, giving them a remarkable edge on development as well as educating the public, considering years we have had in which to do our part. There are few "Chiropractic supply houses" which have made much money off of our profession. Chiropractors have wasted millions, however, buying trash which, if spent on public relations and educating the public, would have pushed us 50 years ahead of where we are now.

Question 184. Out of Chiropractic history, how did upper cervical adjustments come to be proven superior to lower spine adjustments for the removal of the cause of disease?

Answer 184. At first, as we used hand-directed neurocalometer, we looked and that we saw various break readings at various places of full-length backbone area. When neurocalograph was introduced, we found we did not see what we were looking at; there were no breaks other than in cervical region. Adjusting cervical break readings out, we found other mean line heat readings below that area were automatically checked out without doing anything locally at those places. By process of exclusion, we proved out the process of inclusion of lower so-called readings.

See Nos. 95, 206, 226, 131, 158, 74, 97, 100, 119, 132, 173, 182, 189, 235, 242, 291, 26, 95, 116.

Question 185. Would you explain why shoe lifts should not be used to correct lateral spinal bendings?

Answer 185. See Nos. 159, 109.

Question 186. What would you adjust when atlas is ossified to the condyles?

Answer 186. In the world's largest osteological collection are many specimens of skulls — some with ankylosis between occiput and atlas, or atlas and axis, or axis and third cervical; but only one or two where occiput, atlas, AND axis ARE ankylosed. Innate seemingly provided ONE loose articulation for an accidental or intentional adjustment to be made. It "atlas is ossified to condyles", then adjustment would be between atlas and axis.

Question 187. In accepting patients who are in the terminal state, in a state that does not license Chiropractors, how may a Chiropractor be protected from prosecution if the patient dies?

Answer 187. In event of death, where there is no attending physician, coroner must make out death certificate. As a diagnosis must be stated as to cause of death, it is better to let coroner assume responsibility. If he makes mistake, then responsibility is upon him. If Chiropractor makes same mistake, he might be tried for malpractice or manslaughter. Even tho licensed, he could be tried for either. Regardless of whether licensed or not, coroner can demand post mortem by city or county physician, and upon that report could come charges. In event of death, regardless of how meritorious, relatives can always START malpractice suit. This is where malpractice insurance in the ICA pays for itself many times over. A Chiropractor might practice many years and never have a suit; then again he might have lightning strike any time with any case. Average malpractice trial is expensive. He could pay assessments to ICA for thirty years, and still be ahead. We have seen malpractice lightning strike more than once, same place. It pays to be protected.

Question 188. As a general rule, would you say that atlas laterality is opposite constant break in sick pattern as shown by neurocalometer or neurocalograph?

Answer 188. We know of no way to determine any fixed rule as suggested. We can have a R. laterality and R. break, or vice versa. It could be a L. laterality and a R. break. There is no rule, notwithstanding every once in a while this question bobs up when somebody with less experience or break-down analyses does say he has a rule.

See Nos. 196, 214, 103, 113, 153.

Question 189. If an atlas or axis adjustment will eventually

correct lower spine misalignment, will not an adjustment on lower spine, and then a specific, correct the condition much sooner?

Answer 189. See Answer 182.

ONLY a **SUBLUXATION** can be adjusted. There are **NO** subluxations below atlas or axis. You cannot "adjust" on lower spine because there is **NO** subluxation there **TO** adjust. All you **CAN** do is punch bones on misalignments, doing no good because **THE** superior subluxation which made misalignments below will make them again and again until **THE** subluxation **ABOVE** is adjusted. To punch misalignments below is like taking epsom salts for constipation — all you do is temporarily force bowels to move salts once. Tomorrow you have to take another dose to repeat action.

Question 190. How would socialized medicine influence the advancement of Chiropractic, and also Chiropractors?

Answer 190. See Answer 161, 191, 278.

Question 191. How will Chiropractic be affected if socialized medicine bill is passed and Chiropractic is not included?

Answer 191. See Answer 161, 278, 190.

Question 192. Have you known of any condition where your Clinic staff has adjusted below atlas and axis since you came out with HIO?

Answer 192. The B. J. Palmer Chiropractic Clinic research was established in 1935 — 15 years ago. During this period, thousands of cases have been researched, problems analyzed, all of which research has been broken down into statistics. During that period, nothing has been adjusted in that clinic on its cases, but atlases or axes, with one exception — **ONE** third cervical **DIS**location. Previous to 1935, during transition period between 30 years ago and 1935, various staff members did adjust other places than atlas and/or axis.

Question 193. I realize that by practicing Chiropractic as we have been taught here, we are aiding the profession and furthering it; but what would you suggest for a person who is interested in doing more than that and really devoting his or her life to the progress of Chiropractic?

Answer 193. All depends upon what is meant by "doing more than that." In doing more than "practicing Chiropractic as we have been taught here," you are doing less than that. Nobody in last 55 years, or since 1895, has been able to eliminate one element

or add any other to the fundamental principle laid down by D. D. Palmer. To add more is to dilute those elements. To delete some element is to make it less than it is. To do either is to defeat objectives. Confining oneself to what you "have been taught here" is to serve Chiropractic. Beyond that, education of public mind calls for doing everything you can.

We understand desire of any sincere person to do anything, everything, and "more than that" to hasten a more general understanding of Chiropractic by larger number of people in shorter time. That anxiety must be curbed by sane, sensible, sound, straight-line thinking.

No person, since 1895, has been able to add ONE element to postulate laid down by D. D. Palmer. To ATTEMPT to do so is to make necessary elements impotent. Neither has anybody been able to delete ANY element of postulate laid down, in principle or practice, and make it "more than that." To ATTEMPT to do so is to dilute it to make it LESS than it must be to accomplish objectives.

Every SCIENCE has fixed elements which none can add to or take away from. To attempt to do so is to produce chaos. Mathematics has fixed rules for addition, multiplication, subtraction, and division. Suppose each mathematician had desire to do "more than that" by deleting one or more elements, or adding one or more; or set up arbitrary, empirical, despotic rules of his own — what would mathematics be? What MEDICINE is today — an empiric and arbitrary approach to symptoms, pathology, diagnosis, treatment, where EVERY M.D. is a rule unto himself, none agreeing with other. Suppose every astronomer, of his own free will, would name stars, establish their location, distance from earth, as he saw fit — what would astronomy be? Would it be SYSTEMATIZED KNOWLEDGE OR UTTER CONFUSION? Suppose each chemist would set up formulas to suit individual fancy — would chemistry be A SCIENCE? Given same quantity of elements, same quality of each, mixed in same sequence, under like conditions, ALL CHEMISTS THE WORLD OVER AGREE ON RESULT.

Chiropractic either is a science or it is not. It either has elements of science or it has not. The B. J. Palmer Chiropractic Clinic has researched THOSE ELEMENTS. We state them, enumerate them, make them work. Take an imaginary visit to any fifty Chiropractors' offices, and tell us if any two agree? Each is a mathematician, astronomer, chemist, Chiropractor, setting up arbitrary, empiric, despotic rules and regulations OF HIS OWN, for HIS office only, on HIS cases only. A traveling patient would not know WHAT

to do, WHAT to expect, WHAT to prepare for, in two offices alike. One denies this, another affirms that; then they reverse order. "Chiropractic," as practiced in offices of many "chiropractors" is a hodge-podge without rhyme or reason, devoid of semblance of elements upon which CHIROPRACTIC is based. In this respect, Chiropractic as practiced by many is no different than medicine or medical men who are experimenting all the time on all cases, never arriving anywhere. On reverse, our profession has many VERY FINE ALL-OUT ALL-CHIROPRACTIC CHIROPRACTORS, if you find them, know where they are, and if they stay put.

Question 194. Would you explain the correlation, if any, between mechanical energy expanded from correct application of the toggle machine, and the metaphysical energy expanded by concentration and atonement with patient during process of adjustment?

Answer 194. See Answers 88, 126, 163, 168, 195, 194, 61, 66, 96, 162.

"Atonement" means to unite as one, to bring together, to make union — in this instance between Innate Intelligence above, subluxation intervention, and adjustment restoration in body below. This is something which "patient" has nothing to do with "during process of adjustment." This is something Innate ALONE does when channels are free for transmission between brain and body, Innate and function.

Question 195. If, at some time in the future, a more scientific method is introduced for the correction of a subluxation than by hand only, would this still be Chiropractic?

Answer 195. All would depend upon whether or not such method would come within the purview of the Chiropractic principle. If by such "more scientific method" is meant return backwards to orthopedic surgery methods, it would be treatment of effects rather than adjustment of cause. Orthopedic methods are "done by hand" with aid of treatment-of-effects appliances.

See Nos. 163, 20, 50, 88, 126, 171.

Question 196. Is there any possibility that the laterality of a subluxation of atlas has any connection with a neurocalometer reading of either left or right of the median line?

Answer 196. See Nos. 188, 196, 214, 103, 113, 153.

Question 197. Is there any movement existing now, in the Armed Forces, to accept Chiropractic and Chiropractors?

Answer 197. Movements are under way to try to bring this about. We doubt if such will come during your or our lifetime.

Question 198. Is there such a thing as over-THRUSTING, and what is your idea of it?

Answer 198. Over-adjusting can be done in various ways. 1. Continuous punching on a lateral side-slip to its opposite side, and reversing direction from L. side-slip to R. side-slip. 2. Punching away on vertebrae which are not subluxated. 3. Repeated punching on vertebrae which are not subluxated (which Chiropractor thot were subluxations). 4. Adjusting towards laterality of side-slip to R., when it IS a R. side-slip.

See Nos. 166, 205, 198, 19.

Question 199. Disregarding the desire of the public to have professional men go to school four years or more, is it morally correct for Chiropractors to attend for eighteen months, or should they be made to go to school for four years or longer?

Answer 199. See THE STORY OF THE 1949 EDUCATIONAL PROBLEM in Vol. XXIII, Palmer, 1950. We have frequently said, and we repeat, Chiropractic is a simple subject, can be taught in a simple manner to straight-line thinkers, in much less time than eighteen months or four-years-of-nine. Many in our profession who had eighteen months or less are hollering that others to come must have four-years-of-nine to become proficient, to make them safe to render honest service to the sick. We don't see THEM coming back to take difference in time between when they graduated and what they now insist others MUST have. This proves they realize they ARE capable — and they are, because they HAVE BEEN getting sick well all these years. Graduates of four-years-of-nine will be no more capable — in fact, less so. They scream "more time" because the public screams "more time." The public have been medically educated to think a man is not a doctor unless he has had high school, two years of pre-med, four years of medical training; and, then, he fails to get sick people well; therefore, HE must have MORE EDUCATION to make him MORE competent. He could have forty years, and he would still fail. Failure does not lie in semesters, terms, years, or schooling. It lies in system being wrong. They know NO cause of ANY dis-ease. If they did, they would correct it and get sick people well. If they got sick people well, there would be no acute or chronic cases for the Chiropractor. There would be no necessity FOR Chiropractic and it would die a-borning.

Question 200. What can be done, or what is being done, to raise the ethics and standards of the Chiropractic profession as a group? What can be done to eliminate the petty back-biting among field practioners and raise the professional etiquette in the eyes of the public?

Answer 200. Ethics and standards do not come in bottles or education. They come from an inherent desire within the person to be sincere, honest, and capable of rendering service to the sick. Coin all high-sounding phrases one wants, if individual is out to "gyp" people, no amount of oaths will change him. Petty back-biting is common to most people. Jealousy, greed and willfulness to deceive defeat the ends.

Question 201. In your last talk to the School, you propounded the theory that all forms of spastic paralysis were caused by pressure being exerted upon the external portion of the spinal cord, and that organic malfunctions were the result of pressure on the internal portion of the spinal cord.

Proceeding with "straight-line-thinking," how can there be any organic malfunctions without the accompaniment of some form of spastic paralysis?

Answer 201. See Nos. 77, 79, 142.

Question 202. Is there ever any impingement of afferent nerves?

Answer 202. See Nos. 54, 62, 72, 75, 123, 202, 261, 123.

Question 203. How much variation can there be in a pattern reading and still have what should be considered a constant sick pattern?

Answer 203. No two "patterns" are ever EXACTLY alike. They vary somewhat as to locality or degree but IN THE MAIN on any one case will follow a definite form. No "break" should be adjusted when it is less than two points. "How much variation" is a question of judgment.

Question 204. In your opinion, what is the cause of congenital hip dislocation, wherein the socket has not been formed? What is the specific Chiropractic prognosis of a case of this type, discovered at age three?

Answer 204. During pregnancy, we have building of form of body. This calls for proper distribution of materials, at right places, in right quantities. Sometimes, mother is unable to have proper quantity or quality of materials, hence so-called "congenital

hip dislocation" wherein no socket has been formed. Bones may be deficient of material to properly form socket. When there is a lack of proper shape, form, or quantity, due to pre-natal condition, there is nothing Chiropractic can make possible to substitute. Suppose child was born without an arm; Chiropractic adjustments will not build an arm. Pre-natal monstrosities are frequently because of an elongated umbilicus becoming wrapped around some part of baby's body which, because of convolutions of uterus, are snubbed off. This accounts for babies born without an arm, or arms; a leg or legs; or both.

Question 205. What are some of your clinical findings on cases of over-adjustment?

Answer 205. Clinical findings are an increase of original symptoms or pathologies, or an entire reversal in conditions from one lateral half to the other, such as a switch from liver to spleen, etc. This is one problem WE have with cases sent to The B. J. Palmer Chiropractic Clinic, where we have broken down the problem and have begun recovery of health with one adjustment given at right place, right way, at right time. We refer case back to local Chiropractor, with our records. Some of them can't see or understand why they shouldn't "adjust" case at one or more places every day. In short time, case gets worse. If, as, and when case returns to us, we go back to our original solution, correct their mistakes, and soon have case recovering again. This happens frequently. It is regrettable that Chiropractors can't see what they don't see.

See No. 198.

Question 206. Would you give us the low-down on why there can't be a subluxation below axis?

Answer 206. We suggest you get and study THE SUBLUXATION SPECIFIC, THE ADJUSTMENT SPECIFIC, Vol. xviii Palmer, 1934. You will find this issue fully and completely explained. See Nos. 189, 95, 226, 131, 158, 74, 97, 100, 119, 130, 173, 182, 189, 235, 184, 242, 291, 26, 95, 116.

Question 207. What are the principal reasons for ninety per cent of graduating Chiropractors failing?

Answer 207. See Nos. 180, 93, 175, 180, 193, 199, 209, 218, 234, 214, 251, 255, 6, 93.

Question 208. In the research that is being conducted in the Clinic, has there been found any correlation between a patient's neurocalometer pattern of interference and spinograph listing?

Answer 208. See Nos. 153, 30, 31.

Question 209. I know a Chiropractor who uses a practice known as nerve blocking. When patient is in terrible pain, this nerve block relieves pain until the actual adjustment can be applied. What is your opinion of this?

Answer 209. Ideas, methods, techniques of all sorts pile in on us continuously. Many come from graduates of this and other schools who have been in the field a short or long time. Many don't come to us — they become self-starter promoters. Most all start with exaggerated claims which cannot be sustained. They "have a world-beater," something which, like Cascarets, works while you sleep. Most all have ideas of grandeur, fortunes ahead, quick riches, early retirement. They think all they need is make announcement and Chiropractors will take train, fly, wire, and write for whatever it is.

There is one type that will and do buy anything, everything, sight unseen. They get stung, they know they were stung, then buy another and get stung again. They are suckers for every new thing that comes. These people know which shell the pea is under; they bite and bite again and again. There is another group that buys everything that smacks of medicine and treatments. They want to become bastard medical men. Others buy those things strictly Chiropractic.

For the most part, these promoters are sincere, conscientious, and honest. It is our duty to our profession to realize we do not know it all — there is much to learn. We give a willing ear to all ideas, regardless. We test them carefully, research values, endorse them if they have substantial and lasting value.

Most people are climbing a ladder of understanding. We started at bottom; so are they. We have reached much nearer to top than they. We have behind us 55 years of going thru all that. They are beginning to go thru what we have passed over, given up and cast aside. Ninety-eight per cent of ideas, methods, techniques, written suggestions, etc., submitted, are things we went thru years back, in developing up to where we are. Because it is new TO THEM, they think it MUST BE new to us. Regrettable part is, those who propose much don't know that. THEY think what THEY have IS new.

Right or wrong, good or bad, promoters play with their idea, find the struggle to revolutionize established fundamentals costs more than it is worth, get disgusted and quit. Hundreds come and go — and The PSC goes on forever. As soon as such is presented, we can date backward the year of its development between 1950

and 1895. Our innocent and unsuspecting people buy, thinking they have something better than all that which we have gone thru. And, at that, it MAY be better than anything HE has, depending upon backward age of his ideas and methods. Millions of dollars have been spent chasing pots of gold at ends of rainbows, pounding sand down rat-holes. Some day they realize what we keep telling, which we have sifted thru.

Because 98 per cent of all submitted is past history, field has idea that "if it doesn't originate at The PSC, we won't endorse it." Ninety-nine per cent of all that comes to us is a rehash of issues we went thru years ago, depending upon age backwards. We would rather have RESPECT of field than patting us on back because we inconsistently agreed with them.

About 20 years ago, we spoke at a Wisconsin Chiropractic convention, at LaCrosse. Walking from hotel to YMCA where meetings were held, one Chiropractor TOLD US he had "discovered the real, low-down, fundamental Chiropractic principle and practice which we here DID NOT KNOW and had no idea." Having been thru such many times, we were not surprised to get it handed us once more. We inquired of Dr. Wischer what it was. He then told us about "the vertebral subluxation, occluding an opening, releasing pressure upon nerves, permitting a restoration of normal quantity of mental impulse supply," etc., repeating word-for-word what we have been teaching fifty years. We told him so. He thot HE HAD JUST DISCOVERED CHIROPRACTIC. While he was in school, nothing soaked in. He did not grasp what we were teaching. His mind was blank. Years later, he suddenly awoke and was now handing back to us what we told him years before, which he did not realize until just then. It happens so often it is becoming a habit!

Patient goes to dentist suffering "pain." Dentist injects novocaine or tutocaine. "Pain" ceases. Patient is relieved. Why? Chemically, drug "blocks" afferent flow of sense impressions from tooth to brain where mind interprets it as danger signal. It is much like a person who has lived in the back woods all his life. Never having seen any kind of automobile, he is easy prey for the 1870, 1875, 1880 models. Even tho its pace is like a snail, it is so much better than horse and buggy, he goes into ecstacies and thinks everybody else NEEDS same model. The fellow who owns a 1950 car can't agree.

See Nos. 36, 63, 53, 54.

Question 210. When you adjust, do you try to "move" the vertebra or do you deliver an energy?

Answer 210. Obviously, WE educationally do NOT "move" the vertebra. It is OUR energy delivered, which, when invaded, meets with resistance to internal force; and, between the two forces opposing each other, vertebra moves.

Example: a hammer in hand of man does not move nail. Hammer is inactive, a passive medium. That hammer, in motion, coming down on nail, delivers force to and into nail. Nail, itself, and board it is desired to penetrate, are also inanimate and passive objects. When nail RECEIVES force delivered by hammer in motion, it becomes an animate invading medium. Board resists invasion, but force of moving nail being greater than resistance of board, penetrates into board.

See Nos. 166, 168, 198.

Question 211. What are your views on the existence or lack of existence of unity in the Chiropractic profession? Are there signs of increasing cooperation? Do you think the trend of adverse legislation is swinging from a previous bad to a possible good?

Answer 211. Can you conceive of any group greeting a new idea, as revolutionary as automobile, aeroplane, or Chiropractic, with 100 per cent cooperation? Every advancement has met strenuous personal, professional, financial, and legislative resistance to its invasion. It is healthy it is such. If this were not true, we could run amuck. As years go by, there is increasing evidence that, in ratio as principles and practices of Chiropractic ARE understood, it is accepted by larger numbers.

There is now beginning a trend of legislation swinging our way, in some respects. In other respects it is not. We are winning respect of legislators. We are losing out in trend of legislation to swing to left in complexing its necessities.

Question 212. In a condition which has gone too far to be corrected by Innate, would the sick pattern be considered the patient's well pattern?

Answer 212. No. Under what conditions could ANY sick pattern be construed by Innate to be "the patient's WELL pattern?" If any sick pattern has gone so far that it is beyond reach of Innate to get case well, it would be a worse sick pattern.

Question 213. Would you condemn the use of heat, massage, etc., as means of obtaining maximum relaxation prior to an adjustment — having already determined that an adjustment is in order?

Answer 213. We condemn no method of treatment regardless

of name or form of application. We know they feel good, are usually relaxing, and patient likes them, even to asking or insisting upon getting them from Chiropractor. We insist that no stimulative or inhibitive method will ADJUST CAUSE or can or will get sick WELL. It is NOT necessary to use heat or massage to relax patient, to obtain perfect adjustment. REDuction is OPPOSITE of PROduction. Patient did not have heat, massage, etc., AT TIME OF PRODUCTION of subluxation, therefore they are not needed at time of REDuction.

Any person, legislatively, is entitled to practice anything he pleases, even to prescribing drugs, surgery, or obstetrics, in any state or province; and while he may be charged with "practicing medicine without a license," he cannot and will not be convicted of such upon trial, UNLESS it can be proven HE HAS CHARGED A FEE for so doing. THE FEE is what makes what he does a crime. If he actually practices medicine and DOES NOT CHARGE A FEE, directly or indirectly, he IS NOT practicing medicine, in law. If he practices Chiropractic, in an unlicensed state, and CHARGES A FEE, he is practicing medicine, in law. If he holds a CHIROPRACTIC license, in a Chiropractic licensed state, and uses heat, massage, etc., or any other method outside of purview of Chiropractic principle and practice, AND CHARGES A FEE FOR SO DOING, he is guilty of malpracticing medicine, in law, regardless of fact he calls it "chiropractic." He can be sued for malpractice in so doing, and damages can be recovered by patient upon whom such was used.

Question 214. Is there any correlation between the direction of the swing of a neurocalometer and laterality of atlas?

Answer 214. See Nos. 186, 188, 214, 103, 113, 153, 196.

Question 215. I understand you had a microdynameter in your laboratory, to check same. Would appreciate your opinion as to its value as a Chiropractic machine.

Answer 215. See Nos. 172, 157, 237, 243, 215, 11, 40, 44, 154, 98, 172.

Question 216. If an atlas goes overall anterior, without a sufficient rotation or laterality to create pressure, won't there be an equal pressure on both right and left sides, thereby producing a straight line on neurocalometer or neurocalograph while the patient actually has a subluxation producing an interference? How would you adjust a case such as this?

Answer 216. If by "overall" you mean that both L. and R. sides move anterior, then you are mistaken in possibility of such. It MUST side-slip first, at which time it also goes superior on that side, with which direction it also goes anterior or posterior on that side. Your hypothesis does not occur.

See Nos. 169, 79, 97, 169, 75, 100, 119, 123, 124.

Question 217. We would like to hear what you have to say about a very much confused issue — retracing.

Answer 217. Every dis-ease that follows PROduction of vertebral subluxation grows FROM normal TO abnormal. There are successive steady changes taking place. It is a more or less consistent change. After adjustment is given and REDuction takes place, patient RETRACES backward these abnormal TO normal conditions of regrowth from sickness TO health. Average patient does not notice these changes. Sometimes they are very noticeable. All recovery MUST BE a reversal of formation. No definite or positive statement can be made as to how changes occur, because every case is a rule unto itself. This much we must watch: frequently over-adjusting CREATES new conditions which average Chiropractor may alibi as retracing when in fact it is what HE is doing that creates NEW dis-ease growths.

See Nos. 90, 91, 108.

Question 218. When a student from an upper cervical school, such as The PSC, goes into the field and practices meric work, is this retarding the full advancement of Chiropractic?

Answer 218. IF true that ONLY place there can be vertebral subluxation is atlas or axis, then ONLY place Chiropractor can give adjustment is in that area — occipito-atlantal-axial area. To get cases WELL is ultimate buying objective of him who is sick. IF, knowing this, Chiropractor proceeds to punch backbones a la meric system, he is not adjusting vertebral subluxations and is not doing case any good because of such manipulations because such they are in fact. Insofar as he does something NOT necessary which frequently is harmful, he IS "retarding the full advancement of Chiropractic" to extent he does something he SHOULDN'T DO, and doesn't do all he SHOULD do.

See Nos. 93, 175, 180, 193, 199, 207, 209, 234, 214, 251, 255, 6, 93.

Question 219. When a subluxation occurs suddenly, not gradually, how long would you say it takes a nerve to generate enough heat to record a break pattern by the neurocalometer?

Answer 219. ACUTE conditions BEGIN to occur IMMEDIATELY after sudden PROduction of vertebral subluxation. Acute conditions may not be noticeable AT ONCE by patient; but he DOES quickly observe he has a raise in temperature. That is why physicians use clinical thermometer almost immediately upon arrival to tend case. INCREASED HEAT is usually first symptom to occur. Increased heat manifests itself quickly at place of resistance to flow of normal quantity of mental impulse supply which is always found at location of THE vertebral subluxation. From there, this increased abnormal heat may manifest itself locally in one spot, as boil, carbuncle, ulcer, cancer, appendicitis, laryngitis, etc., or it may spread generally as typhoid, infantile paralysis, small-pox, etc. Such break patterns could be detected within a few moments or minutes following PROduction of subluxation.

See Nos. 169, 79, 97, 75, 100, 119, 123, 124, 216.

Question 220. Please explain the difference between Innate Intelligence and what has been commonly called the "sub-conscious mind" or "subjective mind" of Hudson.

Answer 220. This subject is too exhaustive to go into here. Suggest you see lengthy discussion of these terms in THE STORY OF INNATE INTELLIGENCE in THE BIGNESS OF THE FELLOW WITHIN, Vol. xxii, Palmer, 1949.

See Nos. 25, 46, 47, 48, 111.

Question 221. When placing the neurocalometer to take a reading, one terminal usually makes contact first. Should the doctor wait until the indicator returns to zero before beginning the reading? Some instructors carefully check the lower part of the pattern as well as the top. Others say the lower part doesn't matter — that it may vary due to "neurocalometer technic." Does the lower part matter?

Answer 221. He should place BOTH terminals equally AT SAME TIME. However, should he be careless and place one before other, he should wait until BOTH terminals are equally placed and wait a few seconds until BOTH terminals are equally warm, then begin reading. When both terminals are equally warm, he may or may not have zero reading, depending upon heat conditions at place he starts reading. ENTIRE reading should be considered if he desires to accurately establish and graph a pattern.

Question 222. Anterior rotation is always opposite the pivot point of an atlas pivot. Therefore, regardless of laterality and taking all things into consideration, mechanically and Chiropractically, would it be advisable for a person to administer his thrust on anterior transverse if it can be contacted?

Example: ASR-P pivot on right transverse; so adjust anterior on left.

Answer 222. Simple language is advisable. Questions often involve unusual and not used terms. Let us restate question and make simple sense out of what is desired to be known. A side-slip is either L. or R. Following that, it goes anterior or posterior and superior on side to which it is side-slipped. We cannot disregard laterality. It is primary. Adjustment should be given ON TRANSVERSE PROCESS OF SIDE OF LATERALITY. If it is L., then upon L. transverse of atlas. If on R., then on that side. Let us correct concluding part of question: "Example: ASR-P pivot on right transverse; so adjust POSTERIOR TO left." To "adjust ANTERIOR" is to make it worse because it is already anterior.

See Nos. 198, 205, 19, 166.

Question 223. Can Chiropractic cure inborn or acquired homosexuality? Is it a psychosomatic incoordination of the body?

Answer 223. "Chiropractic" is a name given to a new interpretation of living vertebrates. IT "cures" nothing. Persons are born male or female. If male, he seeks female; if female, she seeks male.

Homosexuality is one condition wherein male and female elements sometimes predominate in pregnancy of opposite sex. If father's male physical depositions predominate, we can have a male DISPOSITION in a child born FEMALE in sex organic structures. If mother's female physical depositions predominate, then we can have a female DISPOSITION or personality in a child born with MALE organic structures. It is possible to have male personality in female body, and vice versa. This is something the child cannot prevent or change. Vast majority of "homos" are acquired in subsequent life. Born normally, with male disposition in male body; individual, because of modesty, fear of acquiring VD, or associations such as in army where only males are present, or in prison where males or females are only companions, homosexuality CAN BE and frequently is acquired — a condition which may continue thruout life. Certain males have an acquired abhorrence of females, evidently planted during youth by parents — one or both. This state of mind, once acquired, follows thru life. Same is true of female, in reverse, especially in girl's schools where only girls are present. Sex and appetites are dominant passions of living; people will rape, kill, and go to any dastardly length to give vent to either.

Notwithstanding above conditions, there are some types of "homos" where there is a subluxation between Innate and Educated

minds, creating an abnormal twisted state of thot in education which seemingly creates a NORMAL desire for same sex to give vent to sex. This WOULD BE an abnormality and should be adjusted.

FEMALE SEX PERVERSION, Maurice Churchill, M.D., Eugenics Publishing Company, New York, discussing question of homosexuality, amongst much else, has these remarks:

"The variety of women making up the general picture of homosexuality is infinite, the individuals making up the picture of mankind. There are the refined and the vulgar, the cultured and the illiterate, the attractive and the repulsive, the happy and the depressed, the atheistic and the pious, and even the mystic." (Page 93.).

"Some homosexuals will change their sweethearts as men do prostitutes. All they crave is sexual gratification with another homosexual through means peculiar to their type. With them the hunger for sex does not differ from the hunger for food. Any restaurant will do. Any woman willing to submit to them is welcome. When the urge overtakes them and no friend is available, they will seek out a harlot and pay her handsomely for services rendered. (Page 94.)

"Some are not unlike morphine addicts who are depressed after getting a 'shot.' Many of these girls are happy when organism is obtained. They are able to go about their business completely oblivious of their erstwhile practices. Their hunger has been appeased, as one expressed it, 'I am myself again.' Quite a number of others are extremely unhappy, and some of them even torture themselves to atone for the profound sense of guilt they are experiencing. Such procedures are known to psychology as 'damning the libido.'" (Page 95.)

"Great care is exercised by many homosexuals in their speech so as not to betray themselves. Some will give themselves away by their talk. Their speech is sexualized. Sexualization of language is an old established fact. This always goes along with sexualization of thinking. The homosexual unconsciously finds a magnetic quality in words, and derives gratification from utterances. Modern psychologists maintain that this speech and sex have a definite relation to the incantations of primitive peoples." (Page 99.)

"One girl is the aggressor, taking the place of the husband, the other takes the place of the wife. Some are always husbands, or wives, others reverse themselves. But there must always be the feeling that one differs from the other. But how can there be activity and passivity in speech? Even if the speech is sexualized, how can there be the normal desire in one to intrude and in the other to give her body for intrusion?

"Institutionalized females, most of them committed for sexual offenses, belong to the lower human strata and form a group all by themselves. They are all classed as moral imbeciles. They are all, or most of them, antisocials, with a pronounced defective moral sense. One is surprised when meeting them. It is not uncommon to find them intellectually brilliant and nimble witted. But they are plausible and ready liars. They lie even when truth might be more serviceable.

"Examination of a great number of committed offenders, and of boarding school girls who admitted homosexual practices, showed no physical anomalies. There was not a sign of any disturbance in their endocrine glands which would account for finding pleasure in the organs they themselves possess. The bodily contour of every one was feminine.

"In this class of abnormals we must go back to the evolution of the human race. Science has long established the fact that we are evolved from a state of double sex, hermaphroditism. The human, in the state of primitivity, was a bi-sexual object as it still exists in many fishes and lower animals. Most of us have lost all traces of bi-sexuality. In the class we are now dealing with there is, under normal conditions, a predominance of femaleness. Taken away from their accustomed surroundings, with their inherent weakness, their sex imbalance with sex uppermost in their minds, and with no men about, women had to take the place of men." (Pages 143-144.)

Question 224. What would be a good Chiropractic answer to the layman as to why babies are born monsters or with undeveloped structures of the body?

Answer 224. In *THE BIGNESS OF THE FELLOW WITHIN*, Vol. xxii, Palmer, 1949, we have gone into exhaustive presentation of this subject. However, we now repeat another phase not presented there.

Assume it takes 400 billion cells to form a baby in uterus. Assume half of this is presented each by father and mother. Assume each goes thru normal span of normal expansion of a completed body of these elements in 280 days. We have a normal child, perfectly formed in all parts.

However, we have giants, pigmies, and Lilliputians, monstrosities and freaks, each born under different conditions. Suggest you get GOULD and PYLE "Anomalies and Curiosities of Medicine," which lists hundreds of each of these.

Giants, pigmies, and Lilliputians are conditions of unequal expansion following birth. Hyper growths of sections of one body are under same heading — such as one leg grows four times natural size; or one thumb grows larger than rest of hand. Hydrocephalous does not come in this category. Giants grow unusually large, all over, equally, years ahead of their time — possibly fifty years of expansion in 20 years. Lilliputians are the opposite. Their growth is retarded. They grew up to approximately ten years and then stopped expanding cells. Pigmies are a cross between giants and Lilliputians, wherein SOME PARTS grow ahead of their time, other parts standing still. They could have normal size head and torso, with diminutive arms and/or legs, etc. These are true monstrosities.

Freaks are produced in entirely different manner. Example: twins may be in uterus, but because of enlarged elongated umbilical cord in gestation, it gets twisted around one body, mixes elements of two bodies and grows them together, as in "Siamese twins," at some place or other between TWO bodies. Or, we may have lower half of twin sister growing from chest of brother, all taking place

in uterus before birth. Or, there may be twins in the making, and certain parts of one grow out of the body of the other — such as fifth leg, etc. All these can be laid to a vertebral subluxation IN MOTHER making expansion development IN TWINS abnormal.

See No. 204.

Question 225. Do you think the field of psychiatry is working on the cause of our cause; meaning fear, worry, anxiety are major causes of subluxation?

Answer 225. The field of psychiatry, as practiced, is of no value to us. These men think mental disorders as phases of wrong thinking, therefore require treatment of how to think right. Treating symptoms, whether mind or body, is not a correction of cause — a vertebral subluxation which produces wrong thinking. Only difference between "psychiatry cases" and insanity is one of degree. "Fear, worry, anxiety" are NOT "major causes of ANY subluxation." If they were, it would be equivalent to saying that effects WITHOUT a cause could be the cause of effects.

See Nos. 25, 46, 47, 48, 111, 120.

Question 226. What is the objection to working on lower spine, and then topping it off with an upper cervical adjustment?

Answer 226. See Nos. 179, 182, 189, 95, 131, 158, 74, 97, 100, 119, 132, 173, 14, 26, 80, 101, 102, 109, 131, 43, 93.

Question 227. Can axis go posterior and inferior?

Answer 227. AXIS can go posterior and inferior. Axis can go posterior because transverse ligament is often green-stick fractured. In so doing, it can also go inferior. See No. 68.

Question 228. What is the relationship between Innate Intelligence and Universal Intelligence?

Answer 228. See Answers 46, 47, 105, 110, 220. Also read carefully article on Universal Intelligence and Innate Intelligence in THE BIGNESS OF THE FELLOW WITHIN, Vol. xxii, Palmer, 1949.

Question 229. What is the object of the toggle recoil? Is it to move the vertebra to remove nerve pressure, or to make energy available to Innate to remove nerve pressure?

Answer 229. See Nos. 194, 210, 230, 88, 126, 163, 168, 195, 61, 162, 96, 66.

Question 230. What is the relation between resistive force and invasive force to Innate of our body?

Answer 230. See Nos. 194, 210, 229.

Question 231. Does a sublaxation of a mother affect the unborn child?

Answer 231. See Nos. 204, 229.

Question 232. In nervousness or cases of insanity, is there a pair of nerves which run down through the foramen magnum and atlas, and then back to the brain, which atlas presses upon?

Answer 232. This raises interesting question. According to neurology of anatomy, no. They claim there are no nerves which go from brain to eyes via foramen magnum; same goes for ears; same goes for nerves leading direct from Innate to Educated brain. How can one account, then, for fact that Chiropractor adjusts atlas (or axis) and restores sight, hearing, and sanitay, as well as other local organic and functional diseases of head? Either neurology is wrong, or Chiropractic is right. Chiropractic IS, BECAUSE we adjust and restore functions to these areas. Medicine, under neurology, is helpless in such cases. Do results prove our premise? Answer to question is YES! Peculiarly, here is THEIR problem as well as OURS. They find paths of dead nerves in dissection. This proves nothing physiologically on LIVING FUNCTIONALLY ACTING MAN WITH PRESENCE OR ABSENCE OF FUNCTIONS. We do not prove paths of nerves in dissection, but DO prove them on LIVING FUNCTIONALLY ACTING MAN WITH ABSENCE AND RESTORATION OF PRESENCE OF FUNCTIONS. With which is LIVING MAN interested? They prove in death and cannot prove in life. We prove in life and cannot prove in death. Dead nerves do not prove what physiological current they convey when alive. Live nerves prove what physiological currents they do convey which cannot be proven upon dead nerves.

See Nos. 229, 230, 2, 194, 210.

Question 233. According to our physiology text book, nerve impulses are accompanied by the use of oxygen, production of carbon dioxide, and heat. Could a sublaxation, therefore, create a cold nerve instead of a hot nerve, and the nerocalometer deflection due to that difference of heat?

Answer 233. Upon pressure on nerves it offers resistance to transmission which sets up increased abnormal heat at that point. From that point on other increased heats in other parts of body, as a direct

result, are adaptative. Result of interference to normal flow, functionally, at peripheries of nerves, is to produce a LACK OF function, hence cold. General bodily heat which follows is Innate adaptation to abnormal lowered heat or increase of cold.

See Nos. 229, 230, 2, 194, 210, 232.

Question 234. What stand would you like us to take, when we get into the field, as to state legislation — establishing a standard for Chiropractic definition and schooling requirements.

It seems to me that a standard should be set, that we should all try to help our state obtain that goal so as to have a nation-wide standard. It would aid greatly in getting more recognition by insurance companies and the government.

Answer 234. Every Chiropractic practice act should contain essentials which best protect Chiropractic, Chiropractors, AND the right of the sick to get well, in worse cases quicker. Chiropractic Boards should consist of such members as are qualified to competently examine Chiropractors in their right to practice CHIROPRACTIC. Revocations should be possible for any who would practice any other or antipodal methods, calling them Chiropractic, such being a misrepresentation to Chiropractic as well as other methods. Examinations should consist of such questions as directly apply to competency on Chiropractic subjects. All questions should be fair and not "catch" questions, and should be fairly and justly marked. Attitude of Board should be liberal with intent of permitting more competent Chiropractors to enter state. If possible, after these conditions have been met, there should be an equalization of a uniformity of all terms for all states alike. Definitions of what "chiropractic" is should be true and truthful TO CHIROPRACTIC and nothing else. All acts should be drawn in conformity with state Supreme Court decisions, that they may be legal. See No. 59.

Question 235. How did you prove ANATOMICALLY that nerve pressure did not exist below axis?

Answer 235. See Nos. 79, 182, 189, 95, 206, 226, 131, 158, 74, 97, 110, 119, 132, 173, 182, 189, 232, 233.

Question 236. It's been said in school that there can be a nerve pressure away from the spine; for example, caused by scar tissue. If so, will this cause disease without subluxation?

Answer 236. See No. 120.

Question 237. From the eight graphs that are recorded after an

electroencephaloneuromentimpograph is run, how do you interpret that the nerve energy quantity current flow is diminished only at atlas and axis level, and nowhere else below specific or above an organ that has a lowered resistance due to a specific subluxation?

Answer 237. The electroencephaloneuromentimpograph is a VERY complicated and scientific instrument. Its records are graphed without distortion. Interpretation of its graphs is eminently difficult, especially for a novice. Nothing we would like to do more than to go into thoro description to better answer this question. It would require a book, by itself. Inasmuch as such instruments are not and never will be in general use in Chiropractors' offices, it would not gain much to try now and here. It requires a staff of four people to intelligently and efficiently use it. Its cost, if for no other reason, would prohibit its general use — about \$100,000, including housing, etc. Suggest you study this subject as covered in **Researching The Unknown Man** to be issued in 1951.

Question 238. From your findings, is a mental or nerve impulse electrical in nature?

Answer 238. What IS electricity? What IS nerve force? What IS mental impulse? This much we know: electricity has no intelligence in, over, or thru its expressions. Nerve force, mental impulse, in LIVING bodies, has. A mental impulse goes FROM certain place TO certain place TO DO certain thing. It is impregnated with intention, judgment, constructive in purpose. Superimposed over, into, or thru carrier wave of 'timpograph wave pattern, is a designed purpose, the like of which we do not find in electricity.

See Nos. 229, 230, 2, 194, 210, 232, 233, 25, 46, 47, 48, 111, 220, 225.

Question 239. Granting good technique, which neurocalometer reading is most dependable — first, second, or third? I have often found first reading different from second or third. First time over, a clear-cut break will show, but second time over, it will not show.

Answer 239. We frequently run into this statement. Vertebral subluxation, occlusion, pressure, interference, resistance, reduced quantity flow are stable and mixed factors. That is, they are "stable" within relative floating potentials. By floating, we mean they change slightly with every turn of head, twist of neck, contracted or relaxed. In spite of these slight variations, pattern remains fixed, fluctuating slightly at different times when different readings are made. If there is a difference in pattern between first, second, or third readings, it is fault of technician in HIS technique, not in difference in issues he is TRYING to read. Read story **DEBUNKING CONCEIT**. With use of neurocalometer hooked to

neurotempometer hooked to neurocalograph, in shielded and grounded booth, readings will be alike up to and until such time as an adjustment is given. Then, and then only, does fundamental pattern change. If different readings are ascertained, there are variables entering which change pattern. We, in The B. J. Palmer Chiropractic Clinic, eliminate every variable, therefore GET fixed and stable readings.

See Nos. 153, 208, 30, 31.

Question 240. How about a patient who never at any time shows a clear-cut cervical break reading?

Answer 240. If he IS a "patient" and assuming that, being a "patient", he IS sick, there WILL BE break reading. Only possibility of there "never at any time shows a clear-cut cervical break reading" would be when nerve force flow is VERY low, approximately a very short time before death.

See Nos. 153, 208, 30, 31, 239.

Question 241. In your research, have you found any interference due to brain pressures resulting from subluxations of the bones of the head, such as Leo Spears talks about?

Answer 241. Let us be practical. Skull is made of several bones which thoroly unite and coalesce into one solid vault. There is no movement of one bone upon, around, or between another, whereby ANY pressure could exist. Every once in a while this high-faluting theory is born in the mind of somebody who tries to make himself think he is a big-shot in having "discovered" something as crazy as the moon made of green cheese. Years ago, we researched Nephi Cottom's "occipital adjustment", to prove that none such did or could exist.

A CHIROPRACTIC sanitarium or hospital is no different in methods used to get sick people well than is Chiropractor's office or The B. J. Palmer Chiropractic Clinic. Clearview Sanitarium is for mental cases. They use nothing but Chiropractic, as every Chiropractor is expected to do. The idea is not true that, because it is a Chiropractic sanitarium or hospital, it must go off the deep end, or is entirely governed by medical rules, regulations, and medical methods of treatment. It is up to the management as to what Chiropractic methods are used.

Dr. Spears has named one section of his hospital "The D. D. Palmer." If D. D. were alive today, he would be the first to resent and refuse to have his name connected with what is being bastardized as Chiropractic under his name. At various times, Dr. Spears

has asked us to permit our name be used on his second section. We have steadfastly refused, for his medical methods would add nothing to our Chiropractic credit. He has asked various members of our profession to write us "and put on the heat" to put us on the spot, to get us to permit such. We have insistently, persistently, and consistently refused to have our name attached to anything which is outside the purview of Chiropractic principle and practice. That money could be richly made by "chiropractors" who are willing to dupe themselves as well as dupe ignorant, innocent, and unsuspecting patients, is obvious. This we have always refused to do.

In SPEARS NEWS (undated) we find following:

"Subjects in Course. Adjustic moves and techniques, including Spears Painless System. Technique for remolding and reshaping distorted skulls in children and babies for correction of cerebral palsy, mental deficiency and epilepsy.

"Subjects to be taught are as follows:

X-ray, hard and soft tissue techniques

Foot adjusting and correction

Skull adjusting, adults

Adjustment of wrists, knees, shoulders, etc.

Soft tissue techniques

Special liver, spleen, heart and lung techniques

Adjustment of the rib cage

Joint degeneration and reactivation

Nerve stimulation technique and when and where to use it to
goad nerves into doing several times their normal amount
of work

Spears hygienic fasting system

Many diagnostic laboratory techniques

Amazing new theory of life — what it is — where it comes from
— how it gets into the body — how it is utilized by the
tissue cells.

Tissue cell technique for speedy reactivation

Corrective spinal exercises

Special cancer technique

Fine points of diagnosis

How to handle epileptic cases

How to handle diabetic and many other types of cases

Eye pressure technique and eye exercises

Diets — foods

Bedside manner and technique

Building and operating Chiropractic hospitals and sanitarium
Cervical and lumbar extension techniques — how to build
cartilages, etc.

Toxemia, its effect upon the nervous system and how to correct
it;

Adhesions and how to get rid of them;

Treatment of varicose veins;

Throat, tonsil, ear and nose techniques

How to start and build a practice

Pediatrics — treating, feeding, and caring for babies and
children

Pre-natal and post-natal care of women

Suggestive therapy

Colon irrigations

How to feed patients unable to swallow — stomach lavage and
gavage

Catheterization — bladder irrigation, etc.

Clinical procedure with office and hospital patient;

How to advertise successfully

Public speaking

Other subjects."

In SPEARS NEWS No. 8, is a partial list of the subjects named
above.

In SPEARS NEWS No. 9, October, 1949, we find this:

"Much of the work taught was entirely new. Some of the subjects
taught were:

- "1. Spears Painless System of Adjusting
2. Reshaping and remodeling skulls for the relief of cerebral
palsy, mental deficiency, Tay-Sachs disease, epilepsy in babies,
children, etc.
3. Nerve irritation or goading nature into doing many times
its normal work and for the relief of pain.
4. Joint reactivation in adults and —
5. Joint regeneration in babies, children and adults.
6. Spears foot adjusting.
7. Soft tissue work.
8. Corrective exercises, etc., etc."

In SPEARS NEWS, No. 10, January, 1950, we find a full page
spread of "Spears TRACTION TABLE" which he describes and

offers for sale to our profession. Pictures are shown of table in use.

On another page, same issue, is "Spears Colon Irrigator is now ready for shipment; * * * *." Pictures are given.

Farther and faster moves pendulum to the left. Everything is "treatment" in SPEARS publications. Where was the Chiropractic ADJUSTMENT lost in the shuffle?

What will his next issue have for sale? You may expect ANYTHING!

We discuss question and answer frankly and openly, quoting issues, because we are concerned in perpetuation of Chiropractic in its purity for posterity. No one man is important. He comes and goes, but Chiropractic was born to elevate mental and physical status and qualifications of a sick human race. This can be accomplished ONLY by its Chiropractic advocates keeping the stream pure by all who use it. In this case, Dr. Spears TALKS much FOR Chiropractic and DOES MUCH AGAINST IT. We regret necessity for answer we are compelled to give.

ICA Review (April, 1950) contains article, "Will They Close the Spears Sanitarium?" We quote pertinent comments:

"There is not a single public servant or state department in Colorado THAT COULD JUSTIFY such an act."

"The Health Director then took steps to close the sanitarium AS A PUBLIC NUISANCE AND HEALTH MENACE."

"Except for an immediate effect on incoming patients to the sanitarium, all this publicity HAS NOT HURT THE PROFESSION."

"But in reviewing how far opposition to Chiropractic will go, we come face to face with the possibility of ultimate control over us by those who would destroy us. Months ago, the battle ceased to be one against Dr. Spears. IT IS A BATTLE AGAINST CHIROPRACTIC."

These statements are not sound.

Dr. Spears, in his Sanitarium, as quoted above, TREATS everything from bones of skull to bones of feet; entire backbones two or three times a day; ribs, arms and legs, etc. He TREATS backs and bellies, irritating disease methods. He lists multitudinous MEDICAL methods which he uses and advertises in his publications. He makes, uses, advocates, and sells traction tables and colonic irrigators, etc.

Spears Sanitarium IS a "public nuisance" when he calls his in-

stitution "chiropractic" when he misrepresents medical and surgical treatment methods AS Chiropractic, and misrepresents Chiropractic by calling medical treatment methods Chiropractic. It IS a "health menace" because he does things he should not do and does not do things he should do, for which he has no medical license. Medical men contend that before any person practices medical and surgical treatment methods he must obtain a medical license; exactly as we, as Chiropractors, contend that before any medical man practices Chiropractic he should secure a Chiropractic license. Spears' offenses are crimes of omission and commission as much as theirs would be if conditions were reversed.

Back in the days of Dan Reisland (Duluth, Minn.) several kinds of traction tables were manufactured and sold to our profession as Chiropractic. The UCA had scores of malpractice suits based on injuries from their use. TRACTION TABLES of any kind ARE palpably ORTHOPEDIC SURGERY. Medical men KNOW this. For Spears to manufacture, use, and sell them TO CHIROPRACTORS is to begin once more scores of mal-practice suits by patients so used. Ignorance of surgical, professional, and legal facts that such use IS orthopedic surgery and an integral part of surgery for hundreds of years, is no excuse.

Some contend there is a legal right question involved; that Spears is being persecuted because it IS a "Chiropractic" sanitarium, therefore he should be supported in his right to have and manage such without molestation from medical interests. IS IT a "Chiropractic" sanitarium or is it a MEDICAL sanitarium using MEDICAL AND SURGICAL methods UNDER GUISE OF BEING "chiropractic"? He may kid himself and some Chiropractors, but he isn't kidding medical and surgical men.

Medical men contend, and justly so, he IS running an all-out MEDICAL AND SURGICAL hospital and is hiding behind the skirts of calling it a CHIROPRACTIC sanitarium; and that as a MEDICAL AND SURGICAL hospital it is inefficient and incompetently run. If it IS a medical and surgical hospital, it MUST subscribe to medical and surgical rules, regulations, and standard practices of any other medical and surgical hospital in Colorado, and be regulated under proper medical and surgical authority, same as others are. With this contention, we agree. Were it otherwise, we would disagree.

If what we state be true, re what Spears advocates, advertises, uses, and sells, all being quotations from HIS OWN publications, it IS in fact a MEDICAL AND SURGICAL hospital called Chiropractic. If so, medical men are justified in doing what they are, trying to close him from using medical and surgical methods.

Reason medical men are attacking him is same reason ICA refused him membership — MEDICAL AND SURGICAL risk was too great for them to assume to defend.

Chiropractors have rallied to Spears' support because they think he IS running a CHIROPRACTIC hospital; that his right to do so is being challenged by prejudiced medical men; that CHIROPRACTIC is being attacked and its liberties placed in jeopardy as such; that he should have a legal right to RUN A CHIROPRACTIC HOSPITAL. If this contention WERE fact, we would heartily concur. The law proves all in favor of MEDICAL AND SURGICAL control of MEDICAL AND SURGICAL methods, even tho they be unjustly and unwisely labeled "chiropractic" and it is called a "chiropractic" hospital. Medical men, in this instance, at least, are NOT attacking CHIROPRACTIC. They are attacking a MEDICAL AND SURGICAL hospital parading under the name of CHIROPRACTIC.

Can we CHIROPRACTORS contend that all IS CHIROPRACTIC that Spears advertises, uses on his cases in his hospital, and offers for sale? Can medical men justify their actions because it IS a medical and surgical hospital? Dr. Spears does not contend that what he advertises, uses, and sells IS Chiropractic. We are certain all we have quoted which he advertises, uses, offers for sale IS MEDICINE AND SURGERY, with some Chiropractic thrown in on the side to camouflage the issue to attempt to justify his right to continued existence.

If Spears were an all-out, all-and-only-Chiropractic institution, all he contends would be right; all medical men contend against him would be wrong; and he would win his fight and all Chiropractors WOULD endorse and support his right.

Dr. Spears is an opportunist, running wild without rhyme or reason professionally, in advocating and using the gamut of medical and surgical treatments we have quoted, none of which ARE Chiropractic. For these reasons, medical men have a right to regulate medical and surgical hospitals exactly as Dr. Spears has a right to run a Chiropractic hospital IF IT WERE SUCH. We cannot condone him for what he might like otherwise to do. We admire his fighting qualities and decry his poor judgment in attaching endless medical barnacles to his "armamentarium." He has permitted himself to get into a financial jam followed by a professional jam that has grown until now it is a tumor on and in his institution. We believe he would like to get from under it if he had the consistency of Chiropractic convictions. For these reasons, we have consistently refused to permit our name to be in any way connected with the

Spears Sanitarium. To do so would be to belie all we fought for down thru the years.

We regret exceedingly that Dr. Spears has jockeyed himself into the position of having a medical and surgical hospital parading as Chiropractic. We regret it has become necessary for medical men to step in and attempt to clean out his medical and surgical methods; or, if continued, to regulate it as such. This is something Dr. Spears should not have gotten into in the first place; but, being in, he should clean it out himself and not try to fight medical and surgical interests which are endeavoring to protect that which is exclusively their right.

Question 242. Are you finding any true subluxations in the dorsal or lumbar areas?

Answer 242. See Nos. 95, 74, 97, 131, 100, 119, 132, 158, 173, 182, 189, 206, 226, 235, 14, 26, 80, 101, 102, 109, 131, 43, 93.

Question 243. Does the 'timpograph find any interferences that the neurocalometer misses?

Answer 243. The 'timpograph verifies locations as proved by spinograph and substantiates degree as determined by neurocalometer. Only difference is the 'timpograph measures QUANTITY.

Question 244. How about a junior 'timpograph for field use; or does the new Model S Ellis machine give true readings of nerve energy interferences?

Answer 244. If such were possible, nothing would please us more. Instrument to which you refer goes into different field and cannot be comparative to same field of service. See 172, 157, 215, 11, 40, 44, 154, 98, 237.

Question 245. What kind of cases should be refused, or referred to surgeons?

Answer 245. All fractures, dislocations, or any other type where patient refuses to comply with instructions re taking of drugs, or is merely trying to play with you in your work.

Question 246. Is it possible to have a major subluxation that will not show a break in atlas-axis region? Could such have equal pressure on both sides, thus giving zero reading? We used to find these with the diagonal technique.

Answer 246. No. It could be A subluxation and produce a break. If it were "a MAJOR subluxation" there WOULD BE a major

break reading. Not one in a million cases would be probable. We have never seen one. When we THOT we found them "with a diagonal reading" it was because we THOT we saw such, but in fact did not. See The Story of Debunking Conceit.

See Nos. 156, 5, 28.

Question 247. Is it good judgment to accept cases of known cancer?

Answer 247. Yes, if not too far advanced, regardless of location. If structure is extremely destructive, it seems difficult to get construction ahead of destruction; rebuilding against decomposition; regrowing ahead of ungrowing.

Question 248. What is most damaging:

1. side-slip atlas (ASR)
2. posterior axis (PRI)
3. rotation of atlas (ASR-A)
4. rotation of atlas and axis (a constant)
5. rotation of atlas and axis in opposite directions (a variable)?

Answer 248. Any one CAN BE most damaging in any ONE case. Most frequent would be most damaging in most number of cases. No one in particular can be worse than any other.

See Nos. 167, 34, 65, 64, 68, 77, 140.

Question 249. What, in your opinion, is the outlook for the ICA and NCA future in regards to merger for better Chiropractic?

Answer 249. There can be no merger between medicine and Chiropractic; between naturopathy, physio-therapy, and Chiropractic; between destructive tactics and constructive work; between legislation aimed and intended to destroy Chiropractic and legislation aimed to preserve Chiropractic for the right of the sick to get well; between an organization that originates basic science bills which are killing off Chiropractors, and an organization which desires all basic science bills repealed; between heaven and hell; between an angel and the devil; between life and death; between treatment and adjustment. These and more reasons could be given.

Question 250. Has there ever been a program to build a hospital so that the Palmer students en masse could serve internship under good doctors?

Answer 250. There is in contemplation the building of a B. J. Palmer Chiropractic Clinic Hospital. Present Clinic building has

a foundation for seven additional floors, each of 16-foot ceilings. Cut to 10-foot ceilings, we could have eleven more floors above our present two. There IS a crying demand, local, national, and international, for an all-Chiropractic home where cases can be given exclusive Chiropractic care. We hope such might occur in the near future. At present, thirty-two students at one time are given internship in The B. J. Palmer Chiropractic Clinic. They are accepted for training under restrictive regulations. Unless they follow rules, they are replaced by others who will.

See Nos. 241, 177.

Question 251. It seems as though patients are never well, Chiropractically. How long should a Chiropractor keep a patient under his care after the interference pattern has been removed?

Answer 251. We plant a seed in good soil. Sun shines. We water the ground. TOMORROW we want to pick fruit. We are impatient, want IMMEDIATE results, and find fault with seed, soil, sun, and everything else unless we instantly find sick people getting completely well. Patients try our patience. We should use same reasonable, consistent, good judgment in cases GROWING well as in GROWING fruit! Once subluxation is REDuced, corrected, no longer existing, give Innate TIME to rebuild a sick body back to health. You should keep your case under reasonable observation after you are convinced interference pattern is gone. What is "reasonable" time? Be reasonable and use reason, which we can't supply in answer to questions, or wrap up between covers of a book. Innate gave you some — use it.

See Nos. 167, 34, 65, 64, 68, 77, 140, 248.

Question 252. In case of another national emergency, do you think Chiropractic will be allowed to render service to members of the Armed Forces, without interference from medical profession?

Answer 252. It will be some time (possibly several wars will have to come and go) before that ideal will become a reality. There would be little, if any, good accomplished if perchance we were to be able now to serve Armed Forces with adjustments, if we were constantly under foot and under domineering thumb of medical interests. They would keep records and use them to our disadvantage. We are convinced day WILL come when we will have a separate department in Armed Forces, same as dentists have. Reason why DENTISTS have a SEPARATE branch is because DENTISTS keep themselves SEPARATE from any phase of trying to steal medicine and mix it WITH dentistry. So long as Chiropractors abuse Chiropractic, try to steal everything in medicine,

calling this duke's mixture Chiropractic, they never will get the right to which they otherwise are entitled.

Question 253. What is the explanation for anatomical freaks?

Answer 253. See Nos. 204, 224, 231.

Question 254. What procedure does a Chiropractor follow when discontinuing drugs from patients with medical histories?

Answer 254. In The B. J. Palmer Chiropractic Clinic, we cut them as of day patient enters. Drugs of any and all kinds BLOCK efferent flow as to function, or afferent flow as to use of senses. Subluxation IS MECHANICAL block. Drugs ARE CHEMICAL block. Why build ONE block on top OF ANOTHER, each reducing efferent or afferent flow. What you do with an adjustment is UNBLOCK A BLOCK, to INCREASE flow of mental impulse supply. Drugs DECREASE it. You INCREASE, drugs DECREASE; where does either arrive? One stymies other. As well not accept case as to permit such. If you permit such, you fool patient, kid yourself, steal his money, and cheat his results. Procedure should be TO CUT!

See No. 78.

Question 255. What is best procedure to introduce Chiropractic to patients who have no previous knowledge of Chiropractic service?

Answer 255. Procedure is to educate THEM as YOU were educated. Eat, sleep, drink, dream, talk CHIROPRACTIC. It took months to convince YOU; and then sometimes we fail. It will take months to convince others; and sometimes YOU will fail. The "best procedure" is to sell yourself to yourself on the thing you try to sell others. There is no sense in your taking epsom salts for constipation and trying to sell adjustments to a patient who has constipation. Your eye wavers, your tongue rings false, your mind is shifty because you try to convince another on that which you are deceiving yourself.

Question 256. In educating patients to the idea and principles of Chiropractic, should it be done individually or in groups?

Answer 256. Individually, if necessary. It is as easy to talk to fifty, one hundred, five hundred, or five thousand. The MASS need education as much or more than the class. Our lives here have been devoted to educating masses by word of mouth, literature, and by example, practicing what we preach and preaching what we practice.

Question 257. Does Chiropractic accept the theory of genetics, i.e., color of eyes and hair, body build, baldness, character traits, etc.?

Answer 257. We take stock in stock, that matter reproduces matter of like kind — color of eyes and hair, general body build, height, etc., but not in baldness or character traits, as these are symptoms of dis-ease.

Question 258. What human weakness is it that causes so many Chiropractors to fail?

Answer 258. When graduating class April, 1948, finalized activities, it voted to make Dr. Pharaoh class advisor and trustee of a small amount of money to be used after one year for publication of a class professional directory.

Dr. Pharaoh has been working on this for past two months. Results have opened several avenues of interesting conjecture based on following:

1. April, 1948, class was one of largest groups we graduated in recent years.
2. It was a representative cross-section of our student body as it exists today and has existed for past several years, and as it will continue to be for years hence.
3. To our knowledge, no figures have ever been prepared as to just what percentage of our graduates opens an office.

In preparation for compiling this directory, 194 questionnaires were sent out. This is based upon the fact that, altho 214 were on class roll, only 194 were cleared as eligible to receive or did receive a diploma after successful completion of schooling. 194 were checked June, 1949, which would give ample time to complete their courses if they intended to.

Of 194 cards sent out, Dr. Pharaoh received 137 replies as to office locations.

Broken down, this gives following figures:

- A. Number of cards sent out — 194
- B. Number of addresses listed — 137
- C. Percentage of graduates in practice or who are associated with our profession in furthering their education to qualify for certain states — 70.6 per cent.

This gives the lie to pessimistic "five per centers!"

Breakdown into States is as follows:

Alabama	5	Nevada	4
Arizona	3	New Hampshire	3
Arkansas	3	New York	20
California	3	Ohio	6
Connecticut	2	Oregon	2
Idaho	1	Pennsylvania	7
Illinois	9	Texas	8
Indiana	3	Utah	2
Iowa	17	Virginia	1
Kentucky	3	Wisconsin	4
Louisiana	2	Washington	6
Massachusetts	4	Canada	6
Michigan	1	Australia	2
Mississippi	4	New Zealand	2
Missouri	4	Denmark	1
Nebraska	1	British West Indies	1

Total — 137

We know of several graduates of this class who are in practice, but who, through oversight or other reasons, didn't reply; which would further increase the percentage.

See also Nos. 93, 175, 180, 193, 199, 207, 209, 218, 234, 214, 251, 255, 6, 93.

Question 259. If it is true that germs are scavengers, that they cannot live on live tissue, would it be logical to believe that germs introduced into the body in great numbers, by way of blood stream, would not produce disease? The individual in this case was kept clear of nerve interference.

Answer 259. This would be true to a certain point. We must be mindful of the Chiropractic fundamental — subluxations are PRO-duced by a concussion of forces, one external invading, other internal resisting. Forces can invade many ways, such as gases, pto-
maine, shocks, strains, twists, etc. All that which enters the human living body is an invading force. Up to certain points, Innate can and does successfully resist invasion. If helpful and healthful, they will be absorbed and utilized for bodily welfare. If hurtful and dangerous, they cannot be absorbed or utilized for bodily welfare and become damaging. Poisons are in essence or in dilution. Carbohc acid is not a poison so long as it remains in the bottle. It is a poison when taken internally. An ounce of essenced carbohc acid could kill. If that same amount were diluted in a barrel of water, it could be drunk with immunity because of being diluted. Same is true of germs. They are scavengers up to a certain

point. If essenced in large doses, via mouth, hypodermic, etc., they could become a poison beyond power of Innate to quickly dilute with internal secretions and excretions, and thus could be a potential invading force sufficient to produce one-half of the concussion of force, hence sublaxation. This actually does not occur in daily existence. It could be artificially manufactured and artificially introduced by man as a test, and it could be destructive.

Question 260. Can germs produce a sublaxation? If so, how?

Answer 260. See Nos. 250, 179, 259, 8.

Question 261. Why is it not possible for a sublaxation to cause an impingement on afferent half of a cycle?

Answer 261. See Nos. 54, 62, 72, 75, 123, 202.

Question 262. How do you explain the unwillingness of Chiropractors in the field, as well as those graduating, to accept the specific method, when they have seen the results of the specific?

Answer 262. Elbert Hubbard said, "The obvious is the last thing we think, see, or do." Why did people fight radio? Why do others oppose automobiles? Why do people belittle aeroplanes? Why does anybody say anything can't be done? The human mind is plastic and elastic or set like concrete and wouldn't change.

Question 263. Please explain why there cannot be a sublaxation below atlas-axis; also why there is no nerve pressure in this lower region, even when a vertebra is misaligned? What DOES happen to the nerve roots emitting between the intervertebral foramen in such cases?

Answer 263. See Nos. 74, 95, 97, 100, 119, 131, 132, 158, 173, 182, 189, 206, 226, 235, 242.

Question 264. Is there any proof that nerve interference cannot appear at intervertebral foramina below axis?

Answer 264. See No. 263.

Question 265. What was the main reason for changing the course at The PSC to 4-of-9?

Answer 265. See No. 90. Read The Story of the 1949 Educational Problem, Vol. XXIII, Palmer, 1950.

Question 266. Have the U.S. process patents on the neurocalometer run out?

Answer 266. Yes. Each year The PSC receives hundreds of letters from over the world offering suggestions which the writers sincerely hope may be of value. The PSC appreciates confidence shown by writers of these letters. We realize that, no matter how extensive our research and development activities, useful improvements will be made by independent investigators. Consequently each suggestion is given careful research consideration.

It has been our experience, however, that in most cases no rights can, in fact, be predicated upon suggestions made by writers of letters. This may be due to fact that an idea is so old as to be available for public use, or it may be subject to a patent, a pending application, or an earlier disclosure of someone else. The PSC may already have a legal right to use the idea in which case there can be no actual or implied restriction of this right as a result of subsequent submission of a similar idea. In case of doubt as to respective rights of The PSC and an outside inventor, it is the practice of The PSC to determine such rights in accordance with principles of rules of United States Patent Office applicable to such matters.

What is an invention? Patent statutes provide that a patent may be obtained by "anyone who has invented or discovered any new and useful art, machine, manufacture or composition of matter, or any new and useful improvement thereof, which was not previously known or used by others in this country," providing certain conditions have been fulfilled. Not every idea, or new arrangement or process constitutes "invention." Generally speaking, a patentable "invention" consists of a novel idea for a machine, article of manufacture, or process, together with conception of actual means for putting the idea into practice, provided machine or article produced or process performed would not have been obvious to one skilled in the art.

Before submitting an idea, first step is to make certain that invention has been completed and that details of how it is accomplished have been worked out. Unless this is done before suggestion is submitted, we may have to withhold consideration of the idea. Ordinarily, we cannot consider a suggestion which is no more than recognition of a need.

How should an invention be submitted? Suggestions believed to be patentable can be accepted by The PSC only on understanding that no confidential relationship is established and that The PSC is not obligated in any respect, other than to indicate extent of its interest, if any.

Patent may be obtained by anyone who has made an invention which was not previously known or used by others. The PSC

employs research scientists and engineers who are researching in Chiropractic, radio, television, electronics and many diverse fields.

Rules governing such cases are too complicated to be explained here. It is essential that each inventor establish the date he made invention and prove exact nature of invention. To avoid misunderstanding or controversy, The PSC desires inventors to take every step to protect their interests to their satisfaction.

The PSC will retain material submitted to it, unless a specific arrangement to contrary is made in advance. A model of an invention should be sent. It is not desirable to attempt to present an idea in person or by telephone. If personal interview is necessary, or demonstration of the operation appears desirable, arrangements will be made.

Many ideas may be good, but unpatentable. In this category there may be ideas relating to changes in products, machines or manufacturing processes which do not amount to invention; ideas concerning new fields of application of old principles; ideas relating to new uses for old devices; obvious substitutions of one material for another in same device; ideas pertaining to improvements in business methods; or plans relating to sales promotion or advertising. Such ideas and plans are unpatentable and for that reason rights of the public are almost always so complete that ideas cannot be considered of special value to The PSC. In every case, compensation, if any, for unpatentable ideas must be left entirely to the company.

Definite policy of The PSC is to accept and consider patentable inventions and unpatentable ideas submitted only upon understanding that submission is gratuitous and unsolicited; that it creates no confidential relationship, and that it entails no obligation on our part to adopt suggestion or make compensation for its use. If The PSC believes a suggestion is a patentable invention of technical and commercial importance, negotiations will be undertaken to arrive at a mutually agreeable price for rights under patent to issue upon invention.

The PSC must decline to consider any suggestion or idea, whether patentable or unpatentable, submission of which is accompanied by any reservation or condition whatever or which is or appears to have been submitted in confidence; and The PSC will not, by reason of receipt of a communication on that basis, assume obligation to the submitter.

Question 267. In the selection of a neurocalograph, what advantage has one model over another?

Answer 267. In the selection of a home, what advantage has one over another? Is any one Chiropractor better than another? Why not take any one? What advantage has a scientifically-made instrument designed to accomplish an accurate and efficient service over one made to sell?

See Nos. 11, 38, 40, 44, 87.

Question 268. Universal Intelligence being source, and Innate within man being from the Universal source, the Universal Intelligence being perfect within itself as representing fundamental law, how do you account for the thot to murder and cheat, there being no obstruction to flow from source through man?

Answer 268. Latter part of that question is what makes difference between normal and abnormal; between health and sickness; between sanity and insanity. Where one person murders and cheats, there is a desire to get something for nothing; to take earnings of others without having earned them themselves. It's difference between labor and laziness; leeching off of efforts of others. Innate does not do things that way. Only educated man tries. Educated man tries because he is destitute of Innate qualities that would make him otherwise.

See Nos. 46, 47, 105, 110, 228, 46, 220.

Question 269. What is purpose and object in changing from eighteen months to four-years-of-nine-months, and what effect will it have on the future of Chiropractic?

Answer 269. See Nos. 265, 10.

Question 270. Is there any way of proving that an adjustment given in dorsal or lumbar region would change a reading at atlas or axis?

Answer 270. See Nos. 242, 179, 182, 189, 14, 26, 74, 80, 97, 101, 102, 109, 131, 43, 93, 95, 226.

Question 271. What is your explanation of "transformation," the fifth step of the normal complete cycle?

Answer 271. We often find ourselves word-bound when we try to explain transitions of abstract conditions. "Transformation" is what it implies to transform from one form to another; and yet, word-bound "form" implies shape rather than condition. By use of that term we mean to change its purpose from energy into action of matter.

Question 272. If you are at liberty to do so, please tell us about the outcome of your interview with President Truman.

Answer 272. People who interview President Truman do not repeat what was said, how it was said, and never quote the President. If the President wishes to release information, that is up to him. We are not at liberty to tell "about the outcome" of that interview.

Question 273. Is it possible for a child to have a subluxation during pre-natal life? If so, would it be possible that the Innate Intelligence within that child make a correction before birth?

Answer 273. It is possible to have a subluxation IN THE MOTHER which affects expansion, development, and deposition of tissue cellular structure. This is frequently the case. It is also possible, and frequently happens, there IS a pre-natal subluxation in baby which interferes with normal flow of Innate OF MOTHER to developing child in uterus. Children are born deaf, dumb, and blind; with deformities of various kinds; with actual pathologies, etc. There is no Innate Intelligence "within that child" until it IS born and assumes independency. Therefore, Innate OF MOTHER could not "make a correction before birth" in child itself.

See Nos. 204, 224, 231, 253.

Question 274. In a subluxation, theorize on what produces heat in the impinged nerve. Is it chemical or built up energy? What would you say?

Answer 274. Heat from impinged nerve is not chemical, neither is it "built up energy". It is brot about by RESISTANCE TO TRANSMISSION of normal quantity flow. When "short" is produced in a long electrical circuit, heat is set up at point of resistance. That heat is not "chemical", neither is it "built up energy", but it IS energy WORKING, trying to get thru the squeeze; energy spent at one place when it should be working at another.

See Nos. 169, 79, 97, 75, 100, 119, 123, 216, 219.

Question 275. While in Korea, I saw a regiment lose two-thirds of its men from cholera. The men were given booster shots before entering the Island. The troops had a long rest in Australia. Sanitary conditions were good on the Island, as far as the regiment was concerned. Could you give some explanation for that many men dying?

Answer 275. See Nos. 179, 259, 260, and make same application to poisons.

Question 276. When we deliver an adjustic thrust, we try to deliver a correct energy which Innate can utilize. Is it probable that one could quite easily deliver more energy than Innate would desire, and thus cause the subluxated segment to become misaligned and subluxated in a different manner than the original subluxation? If so, would the pattern of interference change from original pattern of interference on the neurocalometer?

Answer 276. Frequently, we have problem cases sent The B. J. Palmer Chiropractic Clinic where that has occurred. Anything that can be done right from which good comes, can be done wrong from which bad will come. "One could easily deliver more energy than Innate" could absorb for bodily good, from which harm can issue. It could be and occasionally is shifted from side to which originally subluxated, to opposite side which was not originally subluxated at all. If such occurs, pattern of interference WILL change.

See Nos. 166, 168, 198, 210, 205, 19, 222.

Question 277. In many cases, the tip of transverse of atlas is located between mastoid and jaw in such a way that it is quite readily palpated but very difficult or impossible to contact clearly with pisiform, without at same time contacting mastoid, jaw, or both. What do you do in these cases? Is there any objection to contacting transverse with the Chiropractic index finger and executing a toggle in this manner, as for babies?

Answer 277. There is no "objection" to doing what you suggest; but if there is a better way, we are justified doing it the better way. By so doing we get quicker results on worse cases. We have yet to see atlas subluxation that we could not adjust on transverse process. It is SO easy to alibi shortcomings and SO difficult to perfect our technique to doing right thing, right way, at right time.

See Nos. 88, 126, 163, 168, 194, 195, 61, 66, 96, 162, 229.

Question 278. What is the situation on National Health Legislation? What stand should practitioners take on it?

Answer 278. There is little likelihood of ANY national legislation on health at THIS session of Congress. It might never pass.

See Nos. 190, 191, 161.

Question 279. What is present status of Illinois situation, and what part does B. J. have in it?

Answer 279. Illinois is separated into two groups: licensed and unlicensed. License is possible only from a medical board. We have

never conceded their right to license Chiropractors. Chiropractic should at all times in all legislation be under full and complete control of CHIROPRACTORS.

Question 280. What is osteopathy and what is its principle? Are the moves we use in Chiropractic "borrowed" from osteopathy?

Answer 280. Osteopathy laid down fundamental, "the rule OF THE ARTERY is supreme." Nothing, in Chiropractic principle or practice, has been copied from osteopathy. On reverse, much they use today has been taken from Chiropractic.

Question 281. What kind of heat do we read with neurocalometer? Is it muscular, nerve, circulatory?

Answer 281. Any abstract energy flowing thru a concrete substance can be interfered with in its flow. When such occurs, it "shorts" the circuit and offers resistance to its flow. When such occurs, it burns itself as resistance-heat at place of interference. Neurocalometer reads nerve-resistance interference-heat.

See Nos. 169, 79, 97, 75, 100, 119, 123, 124, 216, 219, 274.

Question 282. What does the subluxation do to the nerve impulse?

Answer 282. Vertebral subluxation produces constriction on or around nerve or spinal cord, and in so doing interferes with its normal quantity flow, damming it back into head and starving body below for want of it; lowering function level and slowing up normal activity.

See No. 281.

Question 283. In your lectures and books, you speak of the subluxation being reduced by adjustment. Is the subluxation ever eliminated so that 100 per cent transmission of mental impulses from brain cell to tissue cell occurs?

Answer 283. If such were possible, finite educated man would be the infinite Innate Intelligence within him. In theory, yes; in actuality, rarely.

See Nos. 169, 79, 97, 169, 75, 100, 119, 123, 124, 216, 219, 274.

Question 284. If either atlas or axis separately can be major in a subluxation, why can't both equally be major at same time?

Answer 284. A vertebral subluxation is a dis-relationship BETWEEN three vertebrae. For this reason, it could not be TWO together. One alone could not be; two together could not be, because it could be either one. It could only be one between three.

See Nos. 156, 5, 28, 246.

Question 285. What is reason for most problem cases?

Answer 285. Problem cases are those for which no answer seemingly exists. You then send that case to one who you know HAS the answer. WHO has the answer? One who thinks straight-line thinking, tests all issues by his Chiropractic yardstick, seeks facts not theories, proves or disproves temporary conclusions, is not afraid to affirm right and deny wrong, is not constantly chasing butterflies or rainbows or the pot of gold at rainbow's end; who seeks causes not effects; who locates sublaxations, adjusts, and knows when to stop; who has a method of ascertaining data, and after all this he uses sane and sensible judgment and knows when to quit deceiving himself and his patient.

Question 286. Explain the torque in application of the thrust, and what deficiency in the thrust would occur if it were eliminated.

Answer 286. A corkscrew is a good example of torque. A screw is another. They go downward, diagonally around and circularly around at same time — three directions, simultaneously. A concussion of forces wherein invasionary force had ONE direction would automatically reset and reseal itself without external aid. A concussion of forces wherein invasionary force had TWO directions could possibly correct itself after several internal attempts made by Innate. A torque invasionary force is where there are THREE directions which twist and distort position to where it cannot untwist itself by itself. For this reason, it requires EXTERNAL invasionary force OF THREE DIRECTIONS to untwist or untorque it. Accident LOCKS it. Adjustment UNLOCKS it. That is WHY there IS a necessity for external invasionary force which MUST be delivered upon sublaxation to reset and reseal it back to normal position in relationship with correspondents above and below. If such were NOT done, vertebra would NOT be corrected.

Question 287. About six months ago, in one of your lectures, you mentioned that you are making research on a new and better specific adjustment. Can you tell us more about it now?

Answer 287. Imagine what would happen if we were to feed a broiled t-bone steak, smothered in onions, to a baby eighteen months to one year old? Until such time as our profession can digest what they now have, it would be height of folly to advance more ideas which they are not prepared to understand.

It is not the "lightness sufficient to crush a ripe cherry" idea which is at present advanced by some.

See Nos. 163, 20, 50, 88, 126, 171, 195.

Question 288. There are many cases on record stating that there was no pattern of interference in upper cervical, yet upon adjusting sacrum or ilium the extreme pain caused by the misalignment immediately had vanished. Explain please!

Answer 288. Premise is not sound. There are NOT "many cases on record" as stated. Reverse is true. To restate it: "There are many cases on record stating that there WAS a pattern interference in upper cervical, yet upon "treating effects at sacrum or ilium" extreme pain induced by subluxation superior continued indefinitely until it was adjusted. There is no explanation to an impossible premise.

In early days when we here "adjusted" a la meric system, we almost always made it a rule to "throw in an atlas or axis." Our theory then was premise you state. Later, we learned that what we did below was not corrective factor. Even tho some still think so, it could be accounted for that there is a ratio of accidental corrections which occur.

Question 289. If the adaptative position of an atlas is that of RA, and then moves a little posterior to an extent of impinging nerves; however, moves so little to posterior that it still looks RA according to the X-ray, then the listing is RA and there is a definite impingement. By giving that adjustment on the basis of RA, wouldn't you tend to increase the nerve impingement?

Answer 289. Average Chiropractor has competent and capable X-ray equipment which takes excellent spinographs. He takes pre and post sets. He places them in two separate view boxes, studies them, and sees no change in position between first, second, or subsequent sets. Fault here is there is no method used for correct comparison. His eyes deceive him because there is no posture-constant used between two sets. First set was taken under one posture, second or subsequent sets under differing postures. In The B. J. Palmer Chiropractic Clinic, we use posture-constant, keep record of same, make all subsequent sets under exactly SAME POSTURE-CONSTANT. When we take them to graph lab and place one over other, and make color chart comparisons, we can mathematically measure difference in position from one set to another. WE do not say "it still looks" same. We use a precision posture-constant method.

Question 290. When I was in second or third year, you made a statement which I would like you to explain.

You said there could be an external pressure on cord, without

internal pressure; and internal pressure without an external pressure.

Answer 290. It is our opinion there "could be" "external pressure without internal pressure"; or there could be pressure at some one section of circumference. We know no way of proving EXACTLY where pressure is. We DO KNOW pressure manifests effects at periphery of nerves passing thru canal and, upon adjustment and releasing of pressure, effects disappear.

Hydrostatic pressure could be in or on any part of spinal cord involving few or many fibers at various parts of cord involving various organs here or there. Bone pressure is not direct on cord because of meninges and fluids between.

See Nos. 169, 79, 97, 75, 100, 119, 123, 124, 216, 219, 274, 283, 120, 236.

Question 291. What proof have we that a lower spine vertebra which is misaligned cannot cause a decrease of mental impulses.

Answer 291. See Nos. 74, 95, 97, 100, 119, 131, 132, 158, 173, 182, 189, 206, 226, 235, 242.

Question 292. You own two radio stations, WOC and WHO, still one hears very little of Chiropractic being mentioned. Whenever it is on, most people are in bed.

Answer 292. Average man-of-the-street has idea that a radio station is private property and, as such, owner can do with its time whatever he pleases. He little knows that every radio station is under strictest rules and regulations by Federal Communications Commission. Various people have gone into radio industry with that in mind of using station to boost particularly his business and incidentally sell balance of time to make it pay. During 1949 and so far this year, more than 300 radio stations have had licenses revoked. Some were because station owner used too much of its time to advertise himself and his wares which he was in business to sell. We have used extra precautions not to use either of our stations for Chiropractic purposes. Station WGN — World's Greatest Newspaper, Chicago — does not boost its newspaper. Station WBBM, Chicago, owned by Mr. Atlas of Prager Beer, does not use its time to boost Prager Beer. WGN and WBBM are occasionally used by owners to boost their products. When such IS done they buy time at regular rates accorded any advertiser. Same is true with us on WOC or WHO. We have one talk scheduled once a month on WHO and WOC, at 10:45 P.M. C.S.T. on the nearest Sunday to the 15th of month. We buy that time at regular rates and pay for it

same as any advertiser would for that period of time. Even then, we bend backwards to take a period (10:45 p.m., Sunday night, once a month) when time is least desirable for advertisers. Many stations have been cited for hearing before FCC because of injudicious use of time. We have never been cited, and we don't want to be.

Question 293. Davenport is the founding place of Chiropractic. It has a free clinic for the public, but the clinic is open when most people are working and children are in school. Why not a night clinic?

Answer 293. Davenport is a city of 85,000. We have been here 55 years. There are many thousands here who have never heard the word "Chiropractic", much less taken adjustments, much less being in favor of Chiropractic. There are more physicians and surgeons than Chiropractors in Davenport; three big hospitals, all doing business, notwithstanding we have a large clinic where many sick come and do go home well, who help us spread the gospel. We here are compelled to face same problem of education of masses as any Chiropractor who goes to some other town to practice. It is easy for a rocking-chair student to think, "Why not a night clinic?" It is another thing to put it into practice and make it work. We tried several times, and did not get enough people each night to make it worth while. If a person is sick and goes to physician, he would go to hospital whether he wanted to or not, whether he could afford it or not, whether it was convenient or inconvenient. An M.D.'s cases never play him around twenty-four-hour calendar because they work daytime and can see him only at night. M.D. sets terms, and patients follow or they don't see the doctor. Getting well is more important than letting kids go to school and then take adjustments whenever THEY want to. When Chiropractors learn lesson that sickness means death, and health means life, and place THAT primary all else secondary, they will develop a clientele worth while.

Question 294. For a city where Chiropractic was founded, there are many who should be under Chiropractic care, but who are not. Why?

Answer 294. We grant everybody in Davenport should be under adjustment. Here, like anywhere else, there are many people who have never heard word "Chiropractic", much less taken adjustment, much less getting well. We think, tho, a larger percentage of sick people here get well more than perhaps any other city. People here are no different than anywhere else—they are prejudiced. If you

can tell us how we can educate everybody and get them to overcome their prejudices, we will gladly remedy the situation you mention.

Question 295. What is percentage relation of atlas and axis adjustments in The B. J. Palmer Chiropractic Clinic?

Answer 295. See No. 29.

Question 296. How often does axis PI cause interference? How often does axis PI occur, causing interference where no atlas-axis reading (cervical region) occurs?

Answer 296. See Nos. 29, 169, 79, 97, 75, 100, 119, 123, 124, 216, 219, 274, 283, 290.

Question 297. A philosophy instructor constantly says subluxation remains as such due to interference to MUSCLES OF VERTEBRA INVOLVED; otherwise, he states, muscles would bring vertebra or vertebrae back to normal range. Please discuss.

Answer 297. This question is mixed. Any abnormal function of muscles is due to vertebral subluxation, not muscular contractions or contractures producing abnormal subluxation. Muscles, in themselves, as abnormal effect, cannot REDUCE a vertebral subluxation which PRODUCED them. Often, such reports are brot to our attention. We endeavor to have uniform thinking of our faculty, that they may present uniform quantity and quality of instruction. Upon investigation, we find as a rule that students do not understand what was said.

Question 298. Please state important factors in determining whether side-posture or knee-posture should be used. This has never been discussed by Technic Department or Dr. Sherman.

Answer 298. We much prefer side-posture table, and use it exclusively in The B. J. Palmer Chiropractic Clinic.

Question 299. Philosophy instruction mentions quantity and QUALITY of mental impulse. I have never read any of your works discussing subluxation pressure interference where you mentioned QUALITY. Please discuss.

Answer 299. If normal QUANTITY of electricity is getting to globe, it will produce normal QUALITY of light. If half normal QUANTITY gets to globe, we have one-half normal QUALITY of light and one-half abnormal QUALITY of darkness. Same comparison holds good with mental impulse flow. Any reduction of

QUANTITY flow reduces QUALITY of function, efferently, and quality of sense of feeling, afferently.

Question 300. Please discuss harm done to human body by lower spine thrusting to relieve symptoms. When symptoms disappear and no cervical adjustment via rotary or specific has been given, what has occurred? Has the blood supply been increased or has a flow of NERVE ENERGY (not mental impulse) been elicited, due to mechanical shock in area thrust, thus causing "ACTION", as is done when a paralyzed arm is shocked into "action" by stimulating the nerve producing nerve energy?

Answer 300. See Nos. 74, 95, 97, 100, 119, 131, 132, 158, 173, 182, 189, 206, 225, 235, 242, 291.

Question 301. In an instance where atlas is way up under occiput, and no possible chance to contact transverse, subluxation is a variable and no satisfactory contact can be made due to only approximately $\frac{1}{4}$ inch showing beneath occiput on lateral view — would it be worth trying to thrust axis further away from median line in an effort to correct rotation?

This is an actual case. I sent X-rays to Dr. Sherman last year. We never got the pressure out. We tried contacts on mastoid and posterior arch; first mastoid contact removed pattern and case improved considerably. Pattern returned and no further reduction could be accomplished. Obviously, symptoms returned and are getting worse.

Answer 301. See No. 151.

Question 302. In regard to microdynameter, even though it is a medical diagnostic instrument, it is capable of finding nerve pressure and, above all, it proves your theory of upper cervical specific. As other recognized Chiropractic schools teach the use of it, why are we denied this teaching and benefit it might give to Chiropractic?

Answer 302. See Nos. 172, 157, 215, 237, 243, 11, 40, 44, 154, 98, 172, 244.

Question 303. The Illinois Naturopathic Journal has the following article. Is this true or false?

"Word has come to us from Davenport, Iowa, of a change in the B. J. Palmer method of adjusting the upper cervical vertebra only, will be abandoned in favor of the complete spinal adjustment as taught by other schools. If all this be true, we hope that it may

become possible for the two factions to harmoniously unite into one strong professional group."

Answer 303. This is false in implication. Our profession, at large, is divided into two camps — Specific and Meric. Both were developed, researched by us at The PSC. We know relative values of each. Knowing this, we use **EXCLUSIVELY** Specific work in The B. J. Palmer Chiropractor Clinic. There is not now nor will there be **ANY CHANGE** in this procedure. Specific work is far more advanced than meric work. We continue to teach specific work in The PSC, stressing it as superior to meric. There will be no "abandoning" of specific work "in favor of the complete spinal adjustment as taught by other schools." If "other schools" were to teach specific work, they would be compelled to give credit to us for its development, even as today they do credit us for meric work when they teach that.

Here is what we are forced to contend with: meric man sends students to The PSC **BECAUSE HE WANTS THEM TO GET CHIROPRACTIC** as taught **ONLY** at The PSC. He knows, because of having been a student here, The PSC teaches a consistent philosophy, science, and art, confining it to ten-fingered, by-hand-only principles and practices. When this meric practitioner sends students here, he informs them, "Get all specific work you can, **BUT ALSO GET MERIC WORK** even tho you have to buy it outside of The PSC and pay extra for it." Student, once here, finds his mind confused. He believes field man, he also believes us. Sooner or later, he thinks "it would do no harm" to know both methods. Because The PSC **DID NOT TEACH MERIC WORK**, student, upon graduation, goes to "other schools" **TO GET MERIC WORK**. To obviate that, knowing **WE** know more meric work thoroly and better than "other schools" we think it better to teach students meric work here, that we might better show and compare relative values of each as against other. After that, it is up to student to decide which he prefers to use — punch backbones without sublaxations, or adjust sublaxations where, when, and how they are. No one knows uselessness of meric work better than we, now that we have a better, more logical, provable series of research. No one is more capable of comparing values of one system against the other. People outside our school, knowing **ONLY** meric work, exaggerate its importance, assuring student that that, and that alone, gets results, giving wrong valuations to student mind which doesn't as yet know difference, never having been in practice on actual cases. In this respect, he is as bad as field practitioner who knows **ONLY** meric work and has never used specific work, so **HE** is in no position

to make relative comparisons. WE TEACH BOTH SYSTEMS AT THE PSC, and no one is more capable of doing so than we. They are both children of our brain.

As is true of new developments, there is an evolution of new thinking taking place, a transition out of old into new. Telephone, radio, television, automobile, aeroplanes — all old people had to be newly educated to adopt them. Specific work is rapidly taking hold. Meric system is fading out. In exact ratio as Chiropractors realize quicker results can be attained on worse cases by specific work, they adopt it and adapt themselves to it. We must be mindful that people move slowly because they think slowly. There are still some in our profession who stand still, never change. It is this small group that keep our profession standing still. We will teach our students how to curry, harness, and drive horses when hitched to a surrey as well as how to drive an automobile, after which they can take their choice of which they prefer.

Mr. Kettering, the engineer, recently said:

"We can send a message twice around the world in one-half second, but it takes twenty-five years to get an idea thru one-quarter inch of skull."

We think he was TOO optimistic. He was not dealing with Chiropractors!

Question 304. What is your opinion of the value of adjusting guns?

Answer 304. Several years ago, a certain party invented an adjusting gun. He asked for, and we granted permission for him to put it on exhibit at our Lyceum. Chiropractors galore saw it, used it, tried it on themselves. Not one was sold. It spoke for itself.

Read The Story of ACCIDENTAL CAUSE AND CURE. The backbone is such important anatomical territory that no matter what is done, or how, so long as IT IS DONE ON THE BACK-BONE, accidents are bound to happen both ways, in a certain small percentage — larger on PROduction than on REDuction.

That is all any adjusting gun can do — produce accidents either way. Innate might, and again she might not, adapt and adopt ACCIDENTAL concussion of forces to PROduce or REDuce. People may be made better or worse. If worse, you can do no better, after which we can do no less than to correct them under our INTENTIONAL methods of corrective adjustment. One good

way to test the value of any adjusting gun is to make a neuro-calograph reading before and after, and prove what occurs.

Percentage of PROductions and REductions would be no greater than a fall off a ladder, or if case were hit by a baseball bat. We are not interested in ACCIDENTAL PROductions or REductions. We ARE vitally concerned with intentional REduction of vertebral subluxations. When INTENTIONAL concussion of force is delivered at right place, in right direction, at right time, Innate responds favorably in a higher percentage.

It's a question of whether Chiropractor wishes to relegate himself and what he does into same percentage classification of advising a patient to fall off a ladder, being hit with a baseball bat; OR getting a human adjustment BY INTENTION. Which classification he place himself in, depends upon what percentage of results he is interested in securing for his cases — whether accidental or intentional.

Question 305. Where shall I locate? What do I do when I get there? How do I run an office? What do I say and how do I say it?

Answer 305. Go anywhere there are backbones. Each has a subluxation. It is crying for you and your adjustment. Having Chiropractic, connect yourself as a Chiropractor with your adjustment to that subluxation. Get sick people well and the future is yours for the taking. Stick to straight-line thinking and you'll win. Begin messing around with medical theories, incompetencies, and inefficiencies, and you'll lose. Look to Chiropractic in its future and not to medicine in its past. Horace Greeley said, "Go West, young man, and grow up with the country," which was another way of saying: "Get in on the ground floor of a coming profession and you grow with it in exact proportion as it grows with you."

Question 306. Why do Chiropractors who adjust below atlas or axis get such good results?

Why do you advise adjusting only atlas for low back pains and sacro-iliac troubles?

Why not adjust all subluxations in spine and not only atlas and axis?

How can we explain (philosophically) why no pain or blood flow can result from operations, etc., under hypnosis?

If hypnosis creates a subluxation between Educated and Innate, what is physical representation? Is it a subluxation in the sense we know it?

Have you investigated the work of Dr. John Grostic of Ann Arbor? What is your opinion of his method of spinographic analysis and his rule for determining the type of torque to be used?

Answer 306. See Nos. 94, 6, 175, 180, 193, 199, 207, 209, 218, 234, 214, 251, 255.

Question 307. I would be most grateful if you would give me some "light" on a philosophic point which interests me. I realize that the discovery date of Chiropractic is generally considered Sept. 25, 1895, but would you please give me the date of the philosophical discovery of "Innate Intelligence" — when it was first presented and by whom? Was the "intellectual government" of the body ever even suggested by the "ancients"?

Answer 307. Chiropractic was in the pregnancy period between 1890 and 1895. The child was born September 18, 1895. Words "Innate" and "Intelligence" are not new. They are old words and will be found in any standard dictionary. My father was first to unite the two and place on them interpretation he did referring to "an inherent intellectual personality residing within man." Previous to that, all had referred to that something within man which they called by the crude, undefinable, undecipherable "Nature" which was an awkward term used to cover their lack of knowledge of the unknown and hidden mysterious thing in man that ran him. Father conceived it as an INHERENT INTELLECTUAL PERSONALITY, more so than our so-called education or educated personality.

"Ancients" have always known "it" by crude terms such as instinct, nature, sub-conscious, unconscious, non-conscious, sympathy, reflex action, etc.

THE THEOSOPHICAL MOVEMENT, Vol. xx, No. 5, March 17, 1950, has an article titled ASK THE DOCTOR. Inasmuch as there is much with which we agree in these questions and answers, we reprint same, giving credit, except for the Ligeros reference in Question 315. In another story, we quote Ligeros where he denies this statement. This includes Question 308 to Question 320, inclusive.

Question 308. "On what basis does the average patient select a doctor? According to his reputation, the community or religion he belongs to, his personality, or the location of his office?"

Answer 308. "If any man fails to consider the importance of choosing wisely his physician and looking into his methods of treatment, he risks suffering and possible tragedy for himself and

his loved ones. And he also fails in part in his duty as an intelligent citizen. A layman desiring to fulfill his family and community responsibilities by informing himself about his doctor and on current medical issues might put the following questions to his prospective family physician. The answers appended are those that might be hoped for from a really enlightened medical man."

Question 309. "Are you a specialist or a general practitioner?"

Answer 309. "A general practitioner in the old-fashioned sense, treating the sick constitution rather than a mere part of it. A strong, healthy constitution is able to resist and throw off morbid conditions and influences, both internal and external. There are always specialists to call upon when eyes, teeth, etc., require them."

Question 310. "How do you cure a diseased constitution?"

Answer 310. "I do not cure; Nature cures; I merely remove the obstacles to health. Nature is ever working to restore equilibrium and sets up compensations for the most adverse conditions. Every doctor witnesses the power of the human organism to adapt itself to even drastic conditions, and carry on. Lately in medical practice we have strayed far from using this knowledge. An attempt to follow Nature's laws is now called the Naturopathic School of Treatment. Fact that natural living has become so unusual that it is designated as a therapeutic system is one of the ironies of our times!"

Question 311. "In what ways may a doctor aid Nature to correct disorders?"

Answer 311. "Different types of persons and different conditions require different treatment. It is often sufficient to regulate the diet, correct the most unnatural habits and establish a reasonably healthful routine of daily life. Doctors could do much to educate people as to the causes of most diseases and epidemics. Insanitation and malnutrition are the chief of these in our artificial, commercial age. By way of contrast consider that the famous Roman architect, Vitruvius, when planning a city, placed the health of the citizens before all other considerations. He considered whether the land about produced healthful food; a pure water supply; temperature changes; whether the location was healthful or near miasmatic swamps. Even city streets were laid out to avoid harmful draughts. Nowadays, instead of these considerations, commercial interests are paramount. Also it should be known that exploiting the soil for profitable crops and indiscriminate deforestation have so exhausted once fertile land that degeneration has resulted, not only in food

crops, but also in livestock and in human constitutional strength. The nutritive value, moreover, of food, force-grown with artificial fertilizer, is further diminished by canning and preserving. This is tacitly admitted by the addition of 'nutritive' concentrates. Degenerative diseases have increased. But correct farming can rescue soil depleted by modern chemical and mechanical methods, so that it will again support in health plant, animal and human life."

Question 312. "What is your opinion on vitamins, tonics, stimulants, sedatives, alcohol, herbal extracts and teas?"

Answer 312. "The body naturally takes what it needs of vitamins and tonics from proper fresh food. 'Hidden hungers' would never arise if our food contained all needed elements. Raising plants on exhausted soil causes vitamin deficiencies. Giving tonics to supplement deficient food is working with effects. The value of 'whipping up a tired horse' with vitamins is doubtful. Both sedatives and stimulants are used too freely, often in the form of habit-forming drugs. Pain-killers are possibly least harmful when given in minute (homeopathic) doses which leave no toxic drug effects. But remember that pain aids the physician in selecting the curative remedy. It is well known that alcoholism in later life is often due to the taking of medicines containing alcohol in youth. It is better to avoid the use of alcohol medicinally. There are many other means of pulling a patient through a crisis. The medicinal use of herbal extracts and teas is an ancient practice. Physicians who use the homeotherapeutic law of similars (known to ancient systems) as the guide to their selection of vegetable remedies use very many trees, flowers, roots, seeds, leaves, and seaweeds. The medical system of Dr. Edward Bach of England employs thirty-eight; the famed Count Matti of Italy used more. Herbal remedies are neither to be scorned as weak means in severe illness nor considered harmless in hands of the untrained. The exact medical and biological effect of hundreds of plants has been determined by what homeopathic physicians call 'provings'."

Question 313. "What are your belief and practice regarding injections, vaccination and blood transfusion?"

Answer 313. "It is not necessary to invade the bloodstream with foreign substances. Blood donors also are unnecessary. Substitutes for blood developed in Sweden and America have been found adequate to replace even extreme loss of blood. These obviate the psychological and physical risks of mixing blood-streams in an individual — a most undesirable practice. Vaccination, used for about 150 years, has caused many tragedies. 'The Medical Voodoo'

by Annie R. Hale, uncovers the dark side of vaccination history. In 1896, J. C. Burnett, an English physician, recorded in his 'Delicate, Backward, Puny and Stunted Children' the beneficial results he had obtained from homeopathic antidotes to effects of vaccination. That antidotes for vaccination or injection may be used, even after many years, has been claimed. Homeopathy treats poisoning of any kind in the same way. Homeopaths hold that minute doses of homeopathic prophylactics afford harmless protection from epidemics."

Question 314. "A bewildering list of therapies confronts the layman who tries to inform himself, each with its record of brilliant cures: hydrotherapy, colour therapy, manipulative therapy, and many kinds of exercises and diets and fasting — to mention only a few. What is your opinion on these?"

Answer 314. "Their existence indicates that illnesses can be variously treated; each case requires individual handling. Broad knowledge is necessary for a physician to cope with all cases. Hydrotherapy or treatment with water has long been employed in the East. Even in the West its use has spread to public baths, hospitals and sanatoria. Hippocrates used hydrotherapy, diet, exercise and heliotherapy extensively. The therapeutic value of music was so well known to the ancients that some languages had the same word for medicine and music. In India the science of the healing power of sound formed part of what is known as mantrayoga. Aesculapius considered musical harmony and a chorus valuable therapeutic measures. Reawakening interests in this subject is indicated by such new books as 'Music and Medicine' by Schullian and Schoer. Man's known and unknown response to different melodies and rhythms makes one wonder about the effects of popular music today; the Chinese believed that bad music could weaken the moral fibre of a nation. Colour therapy is also in an experimental stage in the West. 'Spectro-Biology' is an interesting field, as Maryla de Chrapowick has shown. In India Dr. H. L. Sharma has done considerable research and written several books on the subject, e.g., 'Light and Colour in the Medical World.' The foremost authorities on therapeutic exercise agree that slow and regular movements build greater strength and control than irregular, strenuous exertions. Violent exercise for the untrained often brings harmful after-effects — muscle tension, heart strain or other internal injuries. The Chinese combine therapeutics, dancing and sports which build up the body through graceful motions, later increasing in speed. Exercise of only a part of the body tends to fatigue, since it throws the body off balance. Therefore simple gradual exercise of every muscle,

without tiring or strain, and relaxation before and after exertion are recommended."

Question 315. "What part do Osteopathy and Chiropractic treatment play in healing?"

Answer 315. "Although bone adjustment and manipulative treatment were practiced by ancient nations (See 'How Ancient Healing Governs Modern Therapeutics' by K. A. Ligeros, M.D.) the modern science of Chiropractic in America dates from 1895, when D. D. Palmer cured a man of deafness of eighteen years' standing by pressing a spinal 'bump' in his neck for three days in succession until it disappeared. Chiropractic teaches that even a slight accident can displace a vertebra and thus diminish or cut off nerve energy to a vital organ, producing chronic disease. The relationship between the skull and the first two vertebrae may vary from normal in many ways. The Palmer School of Chiropractic teaches that the free flow of nerve force from the brain throughout the body determines health, constituting also the best protection against disease. Other Chiropractic and manipulative systems induce a vibratory impulse or stimulation which travels up the spine, producing a corrective adjustment and release of pressure. Nerve pressure in the spine is measured with a sensitive instrument."

Question 316. "What about the electrical diagnostic machines which claim to indicate a patient's condition in detail from a specimen of saliva, blood or urine?"

Answer 316. "From the early Abrams machine and Boyd's Emanometer down to the Brunler-Bovis biometer, these mechanical adjuncts to the science of radiesthesia, practiced an antiquity, all operate on the principle of sympathetic vibration, the value of such diagnostic aids being subject to the operator's skill in interpretation. The monthly bulletins of the American Society of Radiesthesia in New York present information, as does also the British Society of Dowzers. In Europe radiesthesia is used in medical diagnosis, criminology, agriculture and prospecting, etc. Another diagnostic science, Iridology, was discovered over a century ago in Europe, where it has been widely used, and interest in it is growing in America. Briefly, this science claims that the iris is a kind of circular map of the whole body, each organ and part corresponding to a certain section of it, and that incipient disease can be detected by the skilled iris diagnostician by texture, colour, markings, spots, lines, etc., all having a distinct significance in recording bodily deviation from normal. The retina also is claimed to reveal bodily conditions."

Question 317. "What medical legislation do you think should be enacted and what laws repealed?"

Answer 317. "In view of the nature and certain abuse of hypnotism today it should be forbidden by law. Vivisection, too, should be wholly prohibited. If this view seems extreme, examine the data collected by the National Anti-Vivisection Society of England or America. There is also scholarly material against it published in England by surgeons who rank among the most skilled in the world. The Citizens' Medical Reference Bureau, New York City, works against government attempts to coerce the public towards standardized medical practice, and protests against psychological pressure such as 'fear campaign'. Many operations could be avoided by skillful treatment. 'Your Life Is Their Toy' and 'Merchants in Medicine' by Emanuel Josephson, M.D., throw further light on these matters."

Question 318. "In regard to problem cases, what literature could be recommended?"

Answer 318. "The standard of medical practice will be raised if the public is better informed on medical matters. There are both interesting and informative books for laymen. One of these is a biography of Hahnemann by Martin Gumpert, M.D., which dramatizes the struggles of a medical reformer whose services in that role are widely recognized though his theories may not be universally accepted. Unfortunately the author unqualifiedly endorses psychiatry for adults and erroneously asserts that camphor has fallen into disuse as a cholera remedy. Nevertheless, this historical book discusses medical principles that are as pertinent now as then. Young people will enjoy the biography of Hahnemann by Rosa W. Hobhouse, which is non-technical and covers matter not in the first book. Every layman should read Hahnemann's 'Organon of the Art of Healing'. Laymen's lack of knowledge has always made them an easy prey to false advertisements and personalities. They will find valuable information in the following journals: 'Health Through Homeopathy' (The British Homeopathic Association, London); 'Heal Thyself' (Homeopathic Publishers, Ltd., London) and 'The Layman Speaks' (American Foundation for Homeopathy, Washington, D.C.). Doctors of all schools should read the writings of Kent and Close and examine 'The Homeopathic Recorder.' The conscientious physician never stops his education. The chief obstacle to cure is imperfect knowledge on the part of the doctor."

Question 319. "What is known about the use of hypnotism and

mesmerism in medicine? Is any distinction made between them?"

Answer 319. "In the West from the days of Empedocles the two forces of attraction and repulsion which he called 'love' and 'hate' have been known. These are the two basic and most powerful forces. Using Empedocles' terms, 'love' is life, while 'hate' is death. Mesmerism and hypnotism may be said to correspond to life and death. Considering hypnotism first: the process in hypnotism is the contracting of the cells of the body and brain from the periphery to the centre. This is the process of death. The mesmeric one is the opposite. Magnetism or Mesmerism by human influence starts from within and proceeds to the outer surface, thus exhibiting a phenomenon of life. Love and hate are opposites which may be changed into one another. Love is the more variable; its aspects are numberless. There are two kinds of magnetic attraction: sympathy and fascination; the one holy and natural, the other evil and unnatural. Sympathy may be compared to the expanding mesmeric power, fascination to the hypnotic power, whereby the will of another is subjected to one's own. Over a hundred years ago Dr. Francis V. Broussais said 'If magnetism were true, medicine would be an absurdity.' Magnetism IS true. The mesmeric fluid is described as 'flowing from the operator and creeping steadily over the whole body of the subject, changing the polarity of the cells in every part.' Medicine selected according to the Law of Similarity is also claimed to alter the polarity of the bodily cells, thus reestablishing equilibrium. This may be held to make homeotherapeutics a physical plane mesmerism and therefore a safe method of cure, which was practiced by Mesmer in his early years. Allopathy, on the other hand, using the principle of opposition, rather obscures and suppresses symptoms, thus driving illness from place to place in the body by force from without."

Question 320. "What about mind cure, mental healing, Christian Science, faith cure and 'will cure'?"

Answer 320. "These practices do produce 'cures' — but by what means? All are forms of self-hypnotism. Quack remedies, bread or sugar pills, and drugs later proven injurious, also have an impressive list of testimonials. Why? In some cases the cure is brought about by faith. The patient relaxes and expects to get better, thus two of the worst foes to health — fear and imagination — are allayed and Nature does the rest. Pain and disease are Nature's way of showing us that we have broken her inexorable laws. The proper cure is elimination of the cause of the disease while helping it out through the body by reestablishing equilibrium. Any means, how-

ever, physical, chemical, emotional, or mental, employed to erase disease 'miraculously' because it is annoying or painful, enables us only to evade temporarily the just consequences of our own ignorance or misdeeds. To attempt this type of 'cure' by mental means, that is, by affirmation or denial (not thought, but only suggestive formulae) is doubly dangerous. The suppression of symptoms by this means is only a deferment of the day of reckoning; for disease, which originates in the mind, cannot be thus bottled up or forced back and inward without disastrous results. Sometimes even insanity ensues from this. The body is a living machine created and used by the Man within, and it is our duty to keep it in good running condition; if we have permitted it to fall into disrepair or to suffer an accident, it is only proper to use physical means to correct the difficulty to the best of our knowledge — this not for selfish reasons but so that we can use it better for the higher purposes of life."

Question 321. Would you be able to give me the name of the person, and date of graduation of the first lady Chiropractor.

Answer 321. In the January, 1905, class were Mrs. Collier, Mrs. Wright, and Miss Minora C. Paxson.

Question 322. What technics frequently used by Chiropractors do you consider to be the practice of orthopedic surgery?

Answer 322. Orthopedic surgery embraces various and multiple methods of treating diseases of bones, more particularly spinal column. Approach is to attain symptoms and pathologies and then diagnose same with desire of treating it, with desire of its cure or correction. In our library is copy of every book that has ever been published on this subject. These were secured that we might know what did constitute orthopedic surgery; what belonged to medicine; what Chiropractors should avoid to keep from infringing on medical and surgical territory. In all these books, only one refers once to vertebral subluxation. All refer to luxation, dislocation, caries, necrosis, tuberculosis, ankylosis, deformities, etc.

Treatment methods are voluminous, but ones Chiropractors frequently use — thinking they can be, should be, or are incorporated within confines of Chiropractic principle and practice — are traction in many ways; hand and mechanical pressure devices and methods upon curvatures or adaptative curves; stretching, pulling or measuring the comparative length of one leg with the other; lifts under or in shoes; manipulation of deformities of spinal column; etc. Any method which TREATS any symptom, pathology, deformity of spinal column comes within confines of orthopedic surgery.

Remember: Chiropractic principle and practice consists of adjustment of CAUSE of any symptom, pathology, or deformity, therefore is confined to vertebral subluxation, if, as, and when it exists — and not otherwise.

The following is a partial list from our library of some of the authors on orthopedic surgery.

Samual Cooper, Delpech, J. L. Petit, C. Bell, Dupuytren, Howe, Cooper, Kirkland, Anders, Stimpson, McClellan, Gerrish, Lawrence, Gray, Eisendrath, Campbell, Erichson, Bickham, Bickman, Walton, American Text-Book of Surgery, Pott, Ayers, Wharton & Curtis, Dunglison, Gould, Lippincott, Cunningham, MacDonald, Brodie, Delafield, Prudden, Tubby, Stengel, McMurrich, Helferich, Landois, Foote, Simpson, M. Roberts, Bradford & Lovett, Chipault, Gould & Pyle, Astley Cooper, etc.

The Story of INSPIRATION OR OBSESSION – WHICH?

“The Unseen Power”

By Elbert Hubbard

“Dr. John Draper says that over the evening of man's dreams there steals the thought that he has been used by an unseen power for an unknown end.

“Great men with prescience, with the prophetic vision, have ever reached this conclusion—if not earlier, always towards the journey's end.

“Men of imagination of all countries, of all nations and of all times, have founded theologies on this universal conviction. Men like Milton with dramatic ability added to power of imagery and poetry, have given location, form, and substance on which other imaginations have fed. Dante added specific horrors to Vergil's dreams.

“Socrates immortalized a calm belief in an unseen power used to further an unknown end which involved the evolution of humanity.

“Shakespeare gave glimpse of a bourne from which no traveler returns. But as yet, there is still the mystery, still the greatest unknown over which presides always an unseen power which uses humanity for an unknown end.

“Consciously, subconsciously, or unconsciously, human beings have taken cognizance of this unseen unknown, fitting its conception to the time and geographical location.

“Before there was a Fatherland, when Mother Earth was loved by those whom she nourished. The unknown power was the goddess Fortuna. She controlled the destinies of human beings.

“She was without forethought. Her activities were controlled by caprice. If she were pleased, displeased, had good digestion or indigestion, happy or grieved, angry or ecstatic, men either suffered or were benefited, as she willed. Men and women were victims of chance, accident, sentiment, superstition. Were men rich, Fortuna was displeased.

“So women and men cajoled, bribed, flattered, worshipped, sacrificed, in their efforts to please her and receive from her gifts.

“Oracles were consulted to find out what Fortuna had in reserve. Every activity was an omen. The flight of the birds was watched with all awe in man's endeavor to find what Fortuna had in store for him. Animals were slaughtered and every detail of the sacred act was studied and carefully noted, so that, if Fortuna were not smiling, something might be done to make her smile. Even the blood of human beings was sprinkled on her altar.

“The unknown was sacred, terrible. It must be expected. It was the terrible unknown power working for an unknown end.

“Those were the dark ages when causes were wholly unknown and there were no consequences. Then came a time when men assigned a cause to the wrong one for a sequence. If a plague visited a vicinity, the unseen power was displeased. Pure food, uncleanness of living, had no sequence or fear that the people appreciated.

“Instead of building comfortable houses or cleaning a house they already had, they prayed to the unknown, sacrificed or did penance. Salvation was from them. Man's responsibility was little.

"Their conception of power was that of might, forced. If the unknown power wanted anything, it was taken. So riot prevailed on earth, the mob ruled, man spent his time researching for Aladdin's lamp.

"Alchemists' experiments were for turning baser metals into gold. Witches accosted men upon the battlefield and promised them that they should be kings hereafter and to another that his children should be kings. Saul consulted the witch of Endor. Those who do not know cause and effect, even to this day go to fortune-tellers to know which grains will grow and which will not.

"We plan, plot, scheme and arrange, and some fine day Fate steps in and our dreams are tossed into the yeasty deep. We grin and bear it—anyway, we bear it; it is the only thing to do. Gabriel is always out of the particular thing we want most, but he gives us something else just as good—and the strange part is, it is just as good. We never ask for loss, disappointment and grief, but these are the packages often handed us.

"'Merciful Christ! Is this for me?' you cry. And Fate with shrouded head murmurs, 'Yes, for you,' and turns away, and you are alone with your bitterness. The years go by and there comes the earnest suspicion that all is good—even the wormwood and the gall.

"The man who lives in the present, forgetful of the past and indifferent to the future, is the man of wisdom. The best preparation for tomorrow's work is to do your work as well as you can today. The best preparation for a life to come is to live now and here.

"Live right up to your highest and best! If you have made mistakes in the past, reparation lies not in regrets, but in thankfulness that you now know better. It is true that we are punished by our own sins and not for them; it is true also that we are blessed and benefited by our sins. Having tasted the bitterness of error, we can avoid it! If we have withheld the kind word and the look of sympathy in the past, we can today give doubly, and thus, in degree, redeem the past. And we best redeem the past by forgetting it and losing ourselves in useful work. It is a great privilege to live. Thank God! there is one indisputable fact: We are here. — The Fra, April, 1917.

Inspiration or Obsession — Which?

"What is obsession, Chiropractically?" Your question was intended to draw out on what many have observed. In this we shall permit you to draw on our personal account. Your desire is to hear some things which make people curious and whet the appetite for personal understanding. The answer shall involve us. The results performed affect us as a physical being differently than many; yet, in our observations, men worth while—original fellows—geniuses, if you will—who override present thots and put something in their places, even if it is fifty or one hundred years in advance of times—show us this or that man or those men, and we will show you men who are "inspired or obsessed," according to what theological, psychological, or theosophical viewpoint you possess. We show you peculiar personalities, not like the common run; they choose and do peculiar things, dislike the common; they appreciate the odd and mysterious—their ideas are golden and their

every thot—upon one subject or many—stands out as one among ten thousand. Education is usually limited; opportunities have been small; they claim no superiority over fellow man, in fact object to being peered or placed above anyone. They desire to be one of many, but peculiar trend of their thot makes this impossible; for, like or dislike what they think, think they will and cannot avoid it. Get it out they must, for to stop or hinder is to make worse. They appear thus to men they associate with or surround them. Their peculiarities attract men with high educational standing in the world. They come to listen to wisdom that flows, to interpret what he says, yet discount his learning to the extent they think they know what he is talking about; they will get all he gives, thinking with their great educations they can the better present it to the world that can best understand it. Thus those men value their educations. It is what the man utters that attracts—not the man or what the man has gained as he passes thru this world. He seems to possess the open sesame to treasures of past ages for his analyses do not confine him to the present but include the past, and include what WILL come—all of which he works for—to remodel the present to get ready for the future. He seems to possess unconsciously the key that permits facts, not theories, to flow. He seems possessed of not only “second-sight” but tenth-sight—for he looks hundreds of years ahead. He plans for millions, not tens. Thus his horizon is not limited; he appears a seer prophesying and figuring on a world scale; yet as an educated man he could not figure about or with man.

It is said that one man out of every 50,000 thinks—other 49,999 think they think. We don't know how true, but it seems as tho the original man and his ideas are weighed and found wanting—even outclassed by masses who would have him think as they do. The man who seems possessed of something more than human, would be tied down to give impressions that others could appreciate or understand, thus man's usefulness would be curtailed to necessities of today, and instead of being a forerunner of progress he would run to the stake of now and stop, for mankind is selfish and does not desire another man to proceed beyond where he follows.

As for ourself, you have urged us into a statement of facts which we give—we would prefer leaving them unsaid. In years past, we have occasionally lapsed into those things in a friend-to-friend chat, but this will be the first time we have expressed ourself. It seems best to answer your question; and while you have in your private conversations called “obsessed” or even “inspired”, yet we assume the above title.

We have a mission in life; our every effort and inclination is directed to one definite end. Regardless of whether or not we desire to or think it best, if necessity demands action and a certain thot, then come it will regardless of how much we crowd the same down. We have fought ideas when we should have accepted; we have played with "ridiculous ideas" when they were wise and we did not know it; we have wasted valuable time, dallied, and invariably lost. We have disputed, cussed, weighed, measured value, and even ridiculed "new ideas", and we have suffered. We have questioned advisability of putting on lectures when we have been compelled to do so, and every hesitation meant a loss to us—simple matter for which we suffered hours of anguish. Men who think original thots bring out facts they have neither seen nor conceived; thus it is impossible for them to reconcile themselves—for they, with limited education, know little about such a subject. They cannot conceive that they, with limited propensities to command, have been given such a herculean task. It is a surprise to them they have issued such a product and be called upon by infinite powers that are to carry into effect such a tremendous task. For instance, it is our lot to overthrow world of therapeutics. We do not know whether we alone shall accomplish this or whether we have the ball rolling and then lie down and let others carry on. Be that as it may, this is our mission. Why should we have been chosen? We have no education, no leanings, especially to fittings of this task. Why should we have been the special instrument to be driven to accomplish a world-wide movement? There are thousands more eminently fitted, at least such are our thots as we review the field, altho friends urge us to believe nobody could have done in the same way what we have already accomplished. As time progresses, we are delivering more, accomplishing more—and more thoroly feeling our incapability. Occasionally we utter regrets at such a state, but they recoil with more urgent command appeals to go on—that there is much yet to be done. Sometimes we feel the struggle so unequal—the world on one side with all its monies, precedents, established laws, educations well founded and strongly taught, etc.; and we, on the other side, with one new idea—small as it is but recently born—having no money to foster its growth, no precedents, laws against us. We must tear down educations of the past and replace them, etc. You agree the battle is unequal, but Napoleon was but one man and he desired to and almost did conquer the continent. Be that as it may, we are of the impression there are better mediums to be found for such a task.

If you were to ask for a definition of "obsession" we would probably say it was "inspiration gone wrong." That expresses the

that that man is being forced, mentally, to do something contrary to his good judgment or opposing desires of his local and resident Innate mind. Inspiration opposes this on the ground that such ideas come from the most holy, spiritual, and righteous sources. Obsession would be inspiration providing the medium of that—the brain—was normal. So far as educated brain is abnormal, just that far is obsession a reality. Same obsessed that, running thru normal brain equals inspiration. In either case we lead this change to something from outside coming into and passing thru man and dominating his actions. We believe this state of affairs is a case where Innate mind demands rest of its body and demands to get thru some idea and by very force of pressure does get it thru to resident Innate mind and thence to educated mind of individual; and in this way does make implantations until, when there is enough of them, an accumulated idea will be given forth to the world in an animated expression. Inspiration would be a giving of same but at times when physical body was more normal, when all is serene and calm. Only apparent difference between obsession and inspiration is condition of entrance of these ideas from outer worlds of which we know little, and perhaps care less. If outer intelligences persist in coming constantly at times when individual is tired and worn to a frazzle, and persist for years, we are inclined to say "That man is possessed of the devil," for his actions portray great emotions, great struggles, and deep feelings to which he must suffer alone; for, to give utterance to what he thinks and feels, would be to offer himself for ridicule. To say he is receiving ideas of this character only at times when he is rested, when he appreciates entrance of good, progressive ideas, then he would be pleased and considered quite wise, perhaps "one of the sages", but such men become too scientific in their interpretations of things surrounding themselves; they are too progressive for the mass; their opinions are too weighty to be correctly interpreted at large; hence he gets the scoffings of mass, for he approaches to the goodness of God without man's consent. For one man to overthrow many established superstitions would be unjust and offer himself to knowing too much. For one man to prove fundamental under therapeutics, and theology were all working under a superstitious basis, and all of these can be reworked and reestablished under A COMMON HEAD that would stand analysis, would be giving the world too much at one time and from one man. It is considered such a vast amount of wisdom must come after hundreds of years and thru dozens of wise men; hence, because ONE man thinks these thots at one time—he is too good a joke to be true. Take theology—it is a philosophy, but has it a science and an art? If not, then how is it applied to man? If it has a science and art, then

where is it taught and of what does it consist? Theology, with all its philosophy, can be made into a science and art; and this truth we have in Chiropractic. If this is true, it strikes at another world-old superstition, and to grasp this would mean to wake the old world and this they refuse to have done. Regardless of which way man is used as a tool, he meets common opinions of common people on a common subject, hence suffers by drivings of the hordes gone before, but also the hands of hordes present. He becomes a quiet foreboding martyr to whatever his destinies desire to shape him. He does his best in giving much good and receiving little bad—passes on as quietly as possible and suffers usually the torments of the damned with a face and conscience that worries him. His face appears angelic, his mind is unruffled except at times of great revolutions, and then they wonder "why the man is cross today."

Did you ever hear these men, who are tools of some infinite source, express their feelings? Did you ever know any of them CLOSE ENOUGH (for it is true they are very close on such matters) to know what, how, when, and where of the inside workings of their system—for they are being systematically worked for a higher result, the same as any business is being gauged and run by an engineering and mechanical system to a more successful business end. System is system in man, same as other businesses, only on a larger and grander scale. Arrangement and accumulation of ideas is the business of a mind; it is a product the same as wheelbarrows or wagons are accumulations of parts assembled to a definite end—to sell and to assist progress. If it true man can be worked by powers farther on, the same as wood and iron are worked by powers of mind of man. Mind of man is greater than crude metals and timbers; so are brain and body of man but crude metals to mind of the world—that Universal Intelligence that all educational reasoners recognize and give precedence to. A body to such an infinite intelligence is a tool utilized to a specific purpose, knowing it can use one body only to one purpose; same as one factory is used to put out wagons, so is a body of man singled and worked to one end—progression of ideas regarding man and his surroundings.

Naturally, if the building had a mind it would object to being worked 48 out of every 24 hours—its machinery would rebel against such terrific speed and excessive heats to which it must work to produce a stipulated quantity in a given time. So does man object to being constantly worked, to the end of getting no contented rest perhaps for days, weeks, or months, until some apparently significant idea is finished and thoroly threshed out in the mind of one man. After all, product seems so simple, easy, we wonder why

any man could not have seen it before. A wagon is a given example: how many experiments have been conducted; how much waste matter has been added, used, tried again in another form, and then thrown away; how many delicate hands have tried to shape it, mold it into form, and then made a failure—yet when finished, product did come to front, how simple and easy—WHY did not other men, before our time, get them? Such are questions we think, yet many a man has educationally worried himself into his grave to bring forth a better wagon. We used wooden wagons for years, yet today a revolution is taking place in bringing out the stronger, lighter, easier-running all-steel pressed wagon. Same is true of man—we are changing from medical to non-medical age, and one man seems singled to conduct the campaign to that end. When we see another idea added on to what we had already deduced and accepted, how simple it all seems. Yet he has spent many a day, perhaps months, on gathering data, holding it, storing all until such time as they could be associated, labeled, sorted, and systematized to end of another extremely simple, yet practical idea. People judge product, not process of production. Masses judge years involved in development, not steady concentrated hard work of each hour.

Ideas and hard work are keys to all success. How hard it is to get ideas is one of things you do not experience. We are an irregular worker. Sometimes nothing comes for two weeks or more; perhaps nothing but trivialities are written; then, without warning, a start is made and "copy" will tear off like mad. A lecture of 17,000 words can be strung off in three hours. Ideas come before fingers act; suggestions of ideas flow and are as true as science can work them out. Then, again, silence begins its work. It is time for preparation. It seems that times of making and finishing are unequal. If idea is hard, it may take years for the making; meanwhile, other ideas work out to entire satisfaction; but main ones will still keep coming and when all is ready it will come in spite of all we can do.

Obsession is term used by educated superstitious mind to think of the time when mythical devils reincarnated into man, from sources unknown, and made man a veritable living devil. That time has passed. It is now used to express a given quantity of driving force used on a given man to utilize him, as a human thinking factory, to the end of bringing forth products. Driving process becomes to educated mind an apparent obsession; yet were the Innate mind to define same state, she would refer to it as a natural process taking place in a selected accumulation of matter, in a proper place, to the end of educationally interpreting direct thots from a higher source. Those persons devotionally inclined could and probably would call it "inspiration" as ideas came to man without

human intervention from God. That one man "inspired" was favored with direct communication—altho it is a question how far this may be true with everybody. If one man does interpret laws of God, seemingly under pressure, truthfully, and this personifies the ideal, WHY is he NOT inspired? Certainly he cannot think intellectual thots and get the ideas thereof from any other source; certain it is that we are all daily getting power from sources which we call Innate; to be sure we are all servants of one infinite Creation; then why are we in touch with infinite source, and why is it sacrilegious to say the good we think is an inspiration? Some are in closer touch than others; then some people are more inspired than others—whether of his volition or in spite of it?

Obsession is a peculiar thing, little understood by the person obsessed and less appreciated by the onlooker. To person inspired, it is one of his problems to understand or appreciate. He realizes a portion, yet does not comprehend all. He believes in its efficacy of production, yet doesn't know what is coming when it is here. It takes him time to educationally appreciate products of his own Innate brain same as others view him and what he has done. It is that state of being where educationally you have a will of your own, deprived; where what you want to get or do you cannot do until another object has been finished and delivered; where concentration is to one thing and that only, and any attempt to do justice to anything else might as well be passed to one side, for a dismal failure will be the product. Here the ruler IS the ruler without question or dictation.

Educationally, we have intelligence that rules the direction and position of matter below us. Innately, we have intelligence that rules disposition, speed, quantity, and consequential quality of material beings below. All grant this truism. Universally, there is matter; and to universal matter there is universal mind which sees necessities of universal matter, same as our Innate recognizes hourly needs of our body, same as our Educated minds perceive demands of timbers or irons, thus does Universal mind seem to drive onward a human unit mind, to purpose of showing a better way for universal mind to act thru attributes of when, where, and how that specific selection proposes to show at same time. It appears that an intelligence greater than our local Innate keeps everlastingly behind and drives thots into Innate and compelling Innate, in turn, to drive them into the educated mind. Thus study of an "obsessed" purpose is one of degree, of staff work— team work to a team end—so that for weeks, months, and years that person is dominated day and night by promptings behind it, so that this man educationally loses his individuality; he almost seems to live in another world. It

seems that regardless of what he wishes to do, night or day, he has no peace, rest, or satisfaction in anything he does, other than fulfilling demands he is prompted to do. Thus this man loses values which average person calls "pleasures of life."

In looking over pages of history, we find individuals who have been possessed with an overwhelming power "to do something" great and good, and so strong has been this feeling that they have been urged into action by the "call from within," and those have been people who made history, whose names and faces appear on its pages for all time. What was it that drove these people on? Why could they suffer torture, mental anguish, complain least, smile most, sleep least, drive hardest, do ten men's work in same space of time, let one hour's sleep perform duty of ten; what was it that made these people marvels in human endurance? Was it because they enjoyed their work? Yes and no. They enjoyed results but not the making. Did they particularly desire to do work they were on? Not likely—yet they desire, pursue, and continue to pursue, for the "call from within" was what DROVE them on. These men seem born with a purpose—they live a purpose—they accomplish either some or all of that purpose—then die, paying the cost such men have paid. They have been "prodigies", marvels, geniuses in youth, young manhood, and old age, accomplishing things so long as they were free to act and were not curbed; and when they found curb drawing close, they rebelled until they made circumstances come to them. They pursued an unbroken course of success until such time as educated opinions of common people were working to misunderstood breaking point, and then pace-maker would collapse, helpless to pursue course mapped, until ethical and orthodox men removed fetters which were even beyond powers of a genius to remove. Thus does the world, selfish and sordid, discredit the tales, wild imaginings and dreams of its dreamers and revolutionizers. "They don't know, but we do" has ever been controlling power that held even genius from doing most possible good. Such people come upon earth apparently as a servant to this one dominating power.

Person who is not obsessed and does not know by experience what the word means, cannot realize the anguish he goes thru or feels within him when he desires rest, solitude, silence. For instance, his brain has been working for days—his brain being a crucible where rough, unfinished form of thots are gathered. For weeks that brain will be in a whirl; when gradually the fire seems to be burning low, he will lie down tired and weary, ready to drop to sleep; may drop into a light nap, doze into complete relaxation, but, impelled by a constant chain of thot, he is compelled to toss and roll balance

of night with no rest but those constant forms of pictures from which there is no escape—no rest comes to that already overworked and tired body—until he has at last completed and finished itemized work for which this period was working. After this is done, then comes a short breathing spell and the machinery starts and whizzes again. When idea is finished, he usually has something well worth the effort. But does he appreciate what he has? Not usually—for it was purchased at too great a cost. Its beauty remains for ages to come. He elucidates principles, he sees fundamental bases of a law, he gives utterance and leaves it for the educated minds to gradually appreciate and stage them for the people. He is a play-writer, so to speak, but leaves it for the men who can play with minds of masses to stage them. He is no actor, just a quiet reasoner. He is not comprehended, for his logic is as parables except to his nearest and closest students. This obsessed body gets no rest—comfort is not considered. There is so much to accomplish and so little time in which to do it, and so few people of the consistency to bring such ideas forth that they are worked to the limit—their minds are in one constant whirl of fire, his soul is a ball of rapidly revolving new thots. Usually when one idea is finished, it is transplanted on paper, laid away, and another begins unwinding process.

Innate is eternal, everlasting. Matter is without end and power is continuous. One body is but a speck that rolls another roll and passes on. Innate does not recognize being tired, neither does she appreciate details of work as educational man does. She recognizes body will ready a state where rest is demanded, but Innate pursues same tactics with man as she has always done with the world—keeps persistently after a thing until she gets it, never letting up except when compelled, until task has been accomplished. To men who are thus a part of the scheme of the universe, and are working out world-wide problems, they assume the same fundamental—this power draws them on at a terrible pace, irrespective of time or ability. Man is clock work delivering 24 hours of work in 24 hours—that is, 8 hours' labor and 16 hours in generalities, including sleep. But under obsession or inspirational system, that power will lead him 48 hours in 24—not that twice as much time can be crowded into allotted day, but value of product will be greater than product of man as a race. Leaders will cover ground in one year that followers will figure out after a lifetime.

Greatest men (known only after dead and buried) have been those who live at tremendous pressures. Those men are usually of small stature. They have not had time to grow—everything went into thot and working of their brain to exclusion of body.

These men lead and live most unhappy lives. A person may wish to go a certain place or do a certain thing for a matter of recreation—but there is no enjoyment. He can go to the woods, get away from cities or business, but he cannot get away from the inner talking self. No matter where he goes or what he sees, he views a conclusive end upon which his mind is concentrated. When cycles were working, we saw cycles in everything regardless of whether it was a train, threshing machine, or weed—all were cycles, because of its being so universal a principle. So it is with men who think—they see explanations in everything to fit what they think about. It is impossible for them to concentrate or content themselves upon anything, educationally, other than what is desired. As man in a factory works in a groove set by his employer, so does man work in a groove made and fore-ordained by Innate. His educated mind is not wise or strong enough to overcome impelling force behind. No matter how much he may think of this, that, or the other, he cannot—there is certainly no rest or pleasure in being an obsessed person.

Life had many obsessed people—McCormack with his reaper, Deere with his plow, Wright with his flying machine. In realm in which we live, Hahnemann was first worker; he changed medicine from larger doses to smaller; from much poison to little. Then came electric treatments wherein good of both was given, wherein water, etc., were applied oftener than medicines of any kind. Then came Still who started a non-medical movement. Then came Eddy with her Christian Science. Then came Palmer—each having his place, his work to do, his niche to fill. We presume others will fill our place, perhaps sooner than we anticipate.

We speak from standpoint of knowledge, because we feel we are one of persons constantly hounded, whether we will or not. You ask, if we had our choice, would we be anything else? Yes. When we look forward to years to come, there is no question but what the work we may have done will show to greater advantage or value than it does now, and it is better than if it had not been for this dominating power behind; but at same time, fame, if it comes, will not balance weeks, months, or years of pleasure or rest and more quiet life we might have had providing we could have been as others are. We see many enjoying their homes, happy fireside hours, comforts, good nights' rest and sleep. They do not have a world to fight and urge into a better path; they do not have fourteen, sixteen, or eighteen hours in the office, and four hours' discontentment while dozing. All they have comes in the path of least resistance, while we are compelled to be a breaking plow—not only to skeptical world, world of science, but we must be kept down to past

precedents and past customs by our rank and file who have not yet gotten far enough away from ideas of old to let us alone and let us fight battles in accordance with instructions we constantly receive. We are hemmed in by this statute; in fact, every association with which we are concerned or in any capacity where we must utilize men to the definite end to carry out this world-scheme. We must suffer the damned internally, and urge companions to not curb us in our ways of doing. We can be the star in the show troupe, but when we get support from our "supers" we can put on strength of work which we should. If it were within power of one man to be twenty, rest assured things would move, for we veritably believe powers would give strength to run twenty; but when one is one, it cannot be other than one man's product.

We are rulers to educated men, but servants, serfs, slaves to habit within ourselves. We would rather reverse it and be a slave of man and a ruler of ourself. We presume all this seems selfish but all enjoyment is selfish, hence why should not we enjoy with the rest commonplace enjoyments of all?

We (for each of us is a dual person) appear at times thoroly contented, and at other times we would rather be miles from where we are. On days of cross sticks, one says: "I am paid in money to do such and such work", but other fellow says: "Money or no money, I have my mission to fulfill and that MUST come first." At such times educated desire and work may be executed, but not with whole vim it could be done providing both persons agreed. Find a person with strong individuality, it is wrong and unjust to try to curb him to any set of rules made for majority of people; for such men do not live, act, or grow by rules. They will go without meals or sleep for days, standing strains that would put average man out of business; for, by their actions, they contradict all commonplace rules and laws of living. If you want to get their best and the most from them, don't hem and haw them by regulations, for you lose, they lose, and cause for which they are working loses in quality and quantity. Such men—and they are few—can afford to override precedents and win all battles they go into, for they are guided and directed by powers greater than one lifetime education.

At times it seems as tho our greater half will let us alone, but periods of rest are few and far between; but when these times of rest do come is when individual gets back to normal.

Person who leads this life is misunderstood. He does not state to individuals with whom he associates why he takes peculiar turns of opinions or actions he does. His is to be misunderstood; his ideas are "so wild" they could not be just; hence his desires are

misinterpreted and people wonder the why of this or that. Perhaps in a moment of study he is asked a question and his answer is wild; it shoots over heads of questioners, or answer is absolutely wrong because his mind is not on that subject. He speaks in abstract on that question but could talk concretely on uppermost idea, perhaps for hours. But these phases which are being slowly, gradually, and evolutionarily evolved in that mind are not known by the observer; consequently he gets idea this man is either crazy or erratic. He IS to them.

The person who is obsessed is underrated. People think he should be of a lively disposition when fact is he is morbid, despondent, and pessimistic. He should be happy, pleasant, smiling; but if he is preoccupied or serious for a while, they say, "Isn't he peculiar?" They do not know he tossed and rolled all night; that he was driven with a new idea; that he could not sleep for thinking. They don't know that his body gets tired but, because it is driven, doesn't show it in actions; and they mistake driving actions for one of perpetual motion. They consider this man is president of a school and such official position demands he should be polite, courteous, ready to meet his trade at any time; that his time belongs to them and he should be easy to reach and ready to talk money, sickness, family troubles, adjustments, reincarnation, symptomatology, etc., without end, at any time such questions come to THEIR mind. These men usually are one-sided, looking only to side uppermost in their minds, and that idea is one under development. Truth is, it is only at rare intervals that educated self shows itself for what it is; it is only semi-occasionally you see the man as he would desire to be all the time—then you meet an affable, pleasant, courteous person, ready, willing, and glad to talk anything to anybody at any time. Take this man when in the mood, and he can and does give talks that hold audiences spellbound; take him at a disadvantage or a foreign subject, and he will give a good talk but nothing like his best.

Such men are moodists, whether pleasantly or unpleasantly. They are subject to rapid changes from one condition to another. As we review our work year in and year out and what is being accumulated in way of knowledge and legal recognition, publication of journals, books, advanced ideas, and value of each and every step made, and progress of this science before mass of people, we think we are doing pretty well. Some credit is due the other fellow in that he does let us alone—sometimes.

We have been mixed up in this work a long time, and have been asked many times to explain why and wherefore of many things we have done, in ways we did, but we have usually refused for we

were misunderstood. Occasionally friends see what and where, but even they do not appreciate real value of what they see or hear; hence if friends do not, how can strangers know?

We would not have lapsed into these personalities if it had not been that recently we were answering some pointed question with a very dear friend, and he urged us to tell this story. This man lives a life much in common with ours. He has such a receptive brain that he is a constant marvel—the work he does is tremendous—not work you see on surface but labor he struggles thru to get out what he does.

It is immaterial to us how much of this you accept. It is as it is and as we have analyzed it. It has been our life so far. We wish it were otherwise, because we are selfish enough to want to get enjoyment out of life. We are prone to frequently say, "What's the use?" In spite of it all, we are taking the end of all and trying to be an altruist, and if we have been able to give anything to the world that it may progress, then time spent will not have been in vain.

The Story of
A HOLLYWOOD WRITER WHO HEARD
SELLING YOURSELF
DELIVERED TO HOLLYWOOD ROTARY CLUB

"B. J."

By Raymond Lee

"I have always been apprehensive about lectures and lecturers in general. Even a travel talk with an accompanying motion picture arouses my antagonism. I think my weakness on this point is due to the fact I would rather brave a personal reading of a book on the subjects involved than endure an irritating voice, too vivid gestures, an intermittent gasping for breath. The book is without such faults. At worst, the printing can be too small. Yet when a doctor friend of mine asked me to attend a recent lecture in Los Angeles by the famous, or as some people call him, infamous Dr. B. J. Palmer, developer of Chiropractic and the always active thorn in the side of the medical profession, I accepted with conflicting interest.

"I had read and heard many stories about this man's amazing career that ranged from soap-boxes on street corners to the most respected rostrums of the day. He had been showered with rotten eggs, dragged through numberless courts of law, hooted and hissed at, broken again and again by his own father's lack of understanding, and yet today thousands administered Chiropractic to the world and the war waged as furious as in those first days when he was called 'THE MIRACLE BOY.' I was prepared to see a combination of Barnum, Edison, and St. Paul. It is not without indulgence to say I was more than expectant and yet misgiving weighed upon me. Would the man measure the mind? The hall was full, conversation buzzed, enthusiasm ran high.

"Suddenly, the chairman—a tall, lean man resembling a scarecrow—stood up and mumbled something I didn't hear, and without the slightest fanfare Dr. Palmer made his entrance, acknowledged the loud applause as the ocean would an eye-dropper of water, and before I could take the broadest appraisal of him, plunged into the extraordinary discussion of energy-flow, constants and variables, and their relationship to Chiropractic.

"I listened for a few moments, understanding nothing, and then slowly bringing the man into a focal point in which I actually saw him for the first time. He had entered and started with such alacrity I wondered if he had arrived by some magician's word.

He spoke quietly, intimately. We might have been his family whom he was about to remonstrate for some minor offense against the household laws. Then I felt him convulsively, as one might feel a bolt of lightning and still live to tell the tale. He was talking about truth and knowledge and faith, and banging on the stand and roaring like a lion and waving his hands like an orchestra-conductor. His likeness to Pasteur was startling. His saintliness was even more shocking. And then he swore. He emphasized a point using the word 'damned'. Some people concede this as a curse—I don't. A saint who swore and yet kept a prayer in his mouth!

"Recovering from these striking reactions, I listened to his verbal hammering on the medical profession Gibraltar, and though his hammer might be compared to a fingernail file, I believed every ounce of that mighty rock felt the drilling of his instrument, though in true form it yielded nothing. It was here I saw the rebel in him—the man who would challenge God for the truth even if the knowledge of that truth would land him in hell! And yet I was inwardly assured the Almighty would respect this impish Saint's audacity and not relegate him to that renowned domain.

"As these first inspiring impressions fell away as leaves from a priceless flower, I saw the physical aspects and the heart of the man. He was of medium height, about one hundred fifty pounds, nearing sixty, I knew, but looking more like fifty despite the sandy beard that he revered as much as Samson had his history-making looks. I liked the beard. It placed him with such men as Zola, Pasteur, Ehrlich, and others, yet he could stand shoulder to shoulder with the modern mighty. The nose was large and generous to the face, while the eyes were deep set with heavy brows from which their light shown with the redemption of beacons in a storm. They swept the room, the people, the city, and the world and firmament. They looked into the very womb of eternity and were not afraid. Always they searched and hungered and were never satisfied. The eyes of this man were truth and knowledge on the hunt. He wore glasses and when he cocked his head and the light hit the lenses the eyes grew in size and reminded me of an eagle, with talons tense, whirling down upon unsuspecting prey. But Dr. B. J. Palmer hadn't the cruelty to be a true eagle. The mouth was full, beautiful and red and sensual—sensual like John the Baptist, with self persecution and sacrifice. I saw Salome in the shadow and the dead mouth cursing the world's greatest prostitute.

"He was dressed in a gray suit that needed pressing, gray spats and dark shoes, and a dark tie that he had pulled at several times before entering and which would have been more at home in his

coat pocket. He poured a glass of water, drained it, and smiled. His face wrinkled like paper crumpled in the hand. It was the most satisfying smile I had ever seen. It was boyish, young, innocent. He was happy up there and he wanted his audience to be happy, though for the next two hours he was going to raise particular hell with these men and women who had abused his sacred heritage—Chiropractic—abused through ignorance and misunderstanding.

"Dr. Palmer talked about his million dollar clinic at Davenport, Iowa, about its histrionic accomplishments, about the future, the past, the present, truth and knowledge and—humanity. As long as blood coursed through his veins he would fight to know and destroy by that knowledge the suffering of that humanity. I have never spent such a short time and heard so much. I admit I knew nothing of the technical side; I admit I was taking him at face value; but in God's name who wouldn't, when a man stands before five hundred people and calls his father a saint and a devil in the same breath. 'I love and revere the name of D. D. Palmer, the father of Chiropractic as I do the greatest of saints; but I hate the man, the beast, the cad, the cheat whom I, B. J. Palmer, call my father.'

"My hands were moist and my throat dry, and I had tears in my eyes as I watched this sincere, honest crusader for truth open his heart and his mind to his listeners with the hope that possibly just one would take up his torch and follow him to the ends of the earth. It wasn't just punching vertebrae he wanted. He wanted to know not believe, know and prove and set down on the tablets of time.

"One might not agree with his theories, his facts, his ideals, as he himself said, but one could not question the daring exploits of his integrity. And sorrow mingled with admiration as I realized this living world would never fully understand or appreciate this man. He would have to preach his greatest truth from the grave. Mankind has the damnable habit of crucifying men like B. J. Palmer and then building altars over their graves!

"I met and shook hands with him and the last word I heard him utter was to a friend: 'Just drop me a line addressed to B. J., Davenport, Iowa.' And then his face was lost in the rushing wave of others who came to congratulate him, the beard, the nose, the eyes of truth and knowledge, the full mouth, but the voice, the words—they rang long in my ears as I stepped out into the street and got in my car and drove home and wished to God I had such a purpose in life!"

The Story of IS CHIROPRACTIC A RELIGION?

At one time, in early history of the development of Chiropractic philosophy, D. D. Palmer contemplated building his Chiropractic philosophy into a religion. He was not a student of an orthodox creed, sect, or denomination, notwithstanding he had studied many thoroly. He was like Abraham Lincoln, in that he knew there was a Superior Intelligence that governed all things, including bipeds and quadrupeds. He believed that no sect, creed, or denomination incorporated anything practical in its application to man.

Chiropractic today, to many who have dug into its reality and application, does what all creeds, sects, and denominations preach about, wish they could do, try to do, viz., unite God into man, and physical man in tune with abstract God.

Of late, there has been a tendency of some of our best students to link or edge in a creed religious philosophy into the Chiropractic practice. Somewhere there IS a demonstrable and practical application of truths that underlie all religions. Somewhere there is a stability of fact weaving itself in and thru this earnest desire of men. If any fact IS, then there is a practical explanation. It is that which this story aims to seek, solve, and explain.

An Analysis

This story can be understood if we analyze and break down schematic illustrations of what man is, how he works, and the correct divisions of mental and physical labor. (See Illustration 1.)

A child is born WITH an inherent, complete internal intelligence—Innate Intelligence. This intelligence nurses at once, knows where and how, urinates and defecates, heals bruises, causes child to cry if pin sticks, mends broken bones, heals burns, digests, assimilates food, heats and cools body, functions secretions and excretions, etc. All these and more are done as well at birth as at death. Seemingly little is added to this intelligence during life to make it more complete.

Same child is born with a portion of its brain vacant—a brain without function. Child begins slowly to use a certain five senses: seeing, hearing, smelling, tasting, and feeling. These ACCUMULATE external impressions, interpret them. They are recorded in this blank brain, card-indexed, cataloged, filed away, systematized for future enlargement of environmental understanding. Child goes to kindergarten, grade school, high school; lives and associates with other children and grown-ups. From *external environment* it imitates a language, actions, right and wrong of issues as parents

inculcate same, etc. This is the ACCUMULATION OF EDUCATION. Child is born with minimum of education. Adult dies with a maximum of same. Upon dying, it again goes back to zero and starts over, in another form in another body. EDUCATION IS SOMETHING WE ACCUMULATE WHILE WE LIVE AND LOSE WHEN WE DIE.

Innate Intelligence deals with ALL INTERNAL functions and has nothing to do with external environment except as it effects INTERNAL functions. Example: If external air is cold, internal heat apparatus will generate more activity to strike a healthy balance, and vice versa. If external atmosphere is hot, internal secretions will increase, thereby increasing external perspiration. If accident occurs, external concussion of force enters, broken bone occurs, internal reparation will increase with expansion of osseous cells to mend break. More external liquids and foods ingested, more internal urination and defecation occur.

Educated Intelligence, during *waking hours only*, directs a certain and reasonable quantity of energy to certain actions, only so far as they have to do with *external* world, such as walking, looking, turning head, raising legs or arms, directing fingers to write or play piano or pipe-organ. Educated brain can be trained into grooves to follow a beam of certain character, such as memorizing. Educated mind can be drilled to think directly upon certain lines in preference to others which it will discard.

At times there seems to be an overlapping of duality of these two minds thru two brains; an interweaving of one into other. Example: a vertebral subluxation exists between Innate brain and Innate body, creating muscular paralysis of function in Innate body. Because thereof, there is a counterpart impression flowing afferently from Innate body to Innate brain, where Innate mind interprets "pain". That Innate mind DOES sense pain is obvious, because Innate body will adaptatively and responsively twitch and jerk. Education ALSO knows "pain," proving duality of sense of pain by both minds simultaneously—Innately to know and act upon, Educationally as a warning that something is wrong and needs correction, to react against.

That Innate mind sends messages directly to Educated mind is obvious. That Educated mind cannot and does not and never has been able to voluntarily send a message direct to Innate mind is also obvious. *Flow is always from above downward, from within outward.* It is never reversed from that process.

Source — Semi-Source — Non-Source

Everything that has been, is, or can be, exists in Universal Intelligence or Innate Intelligence. It has been existing thru ages. Everything that education thinks, as education, comes from Source, II or UI. Educated man can think no more than Source from which he thinks. Everything he thinks about has been previous to him. Some man thot electricity. It existed before he thot it. Principle and practice of flying is in bird. Principle and practice of submarines is in fish. Principle and practice of automobiles is in man. Principle and practice of refrigeration is in man. Principle and practice of Chiropractic is in vertebrates. Back of all actualities in principles and practices were their actualities in II or UI. Man can think no more or no less than amount of energy he receives direct from II or UI to think with. Education never has, cannot now, think anything NEW. "There is nothing new under the sun" could be paraphrased to "There is nothing new in education". Therefore, education never GIVES BACK to source what it receives FROM source.

Because man thinks he thinks with education alone, all education teaches and believes that education alone is all that counts, is worth while, or has significance in process of living. Innate is called such crude insignificant terms as "nature", "sub-conscious mind", etc. Education makes super the sub, and sub the super. This is reverse of their values, actually. It was wise in the beginning that super was placed beyond reach of the sub. Were it otherwise, sub would run all of himself, run the world, and change all things from cosmos to chaos, as he has tried to do with religions.

To illustrate in schematic form a correct analysis of how man functions, lives, and has his being, we present six drawings which we refer to as we build our conclusions in this story. We suggest, when we refer to one, you refer to it also, and get analytical breakdown fixed.

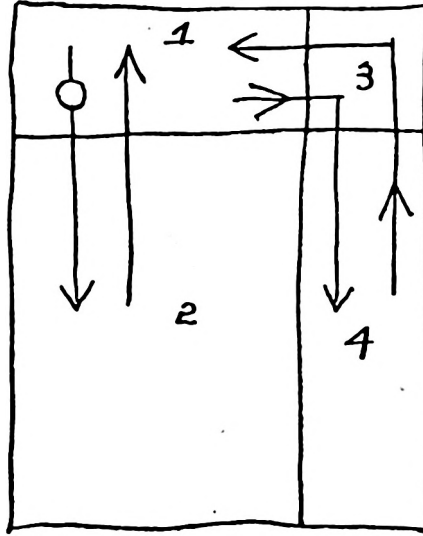


ILLUSTRATION NO. 1

1. Innate Brain in which Innate Intelligence lives in the unit.
2. Innate Body in which Innate Intelligence expresses and acts for and against all internal function in the unit.
3. Educated Brain through which Education is received and thinks education.
4. Educated Body in which Educated thoughts express and act for and against all internal function so far as education has to do with external environment.

Place and Process of Innate thinking.

Innate Intelligence thinks in "1"

Innate Intelligence acts in "2"

There is an efferent flow FROM "1" to "2"

There is an afferent flow from "2" to "1"

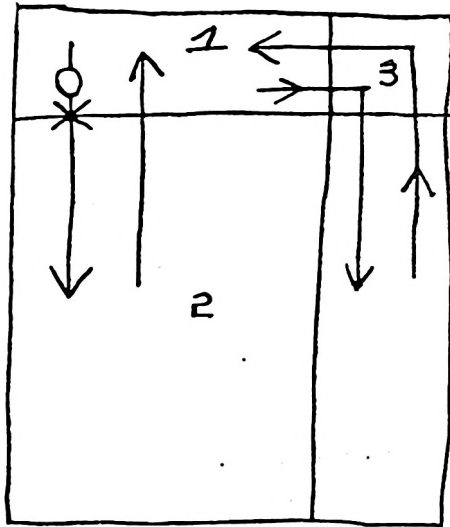


ILLUSTRATION No. 2

"X" is the vertebral subluxation, entering BETWEEN Innate Brain "1" and Innate Body "2"; or BETWEEN Innate Intelligence "1" and Innate Function "2", causing abnormal, unhealthy, reduced quantity of functional flow to "2", producing a reduced quality of "life" in "2".

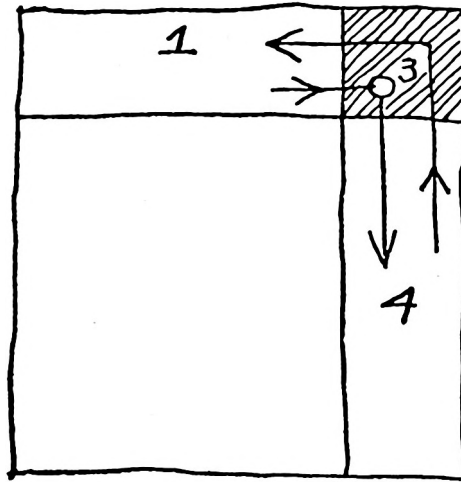


ILLUSTRATION No. 3

"X" is vertebral subluxation BETWEEN Innate Brain "1" and Educated Brain "3", causing abnormal, unhealthy, reduced quantity of functional flow to "3", producing a reduced quality of educated thought values in "3".

Obviously "4" will and can only do what "3" is capable of thinking for "4" to do, for "3" directs "4" what to do, how to do it. The level of reduction can be reduced to where it is on or near a border line between neither being sane nor insane—being neither above nor below the border.

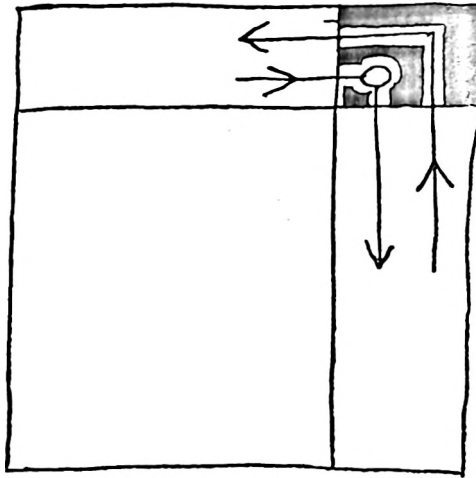


ILLUSTRATION No. 4

"X" is vertebral subluxation BETWEEN Innate Brain "1", and Educated Brain "3", causing abnormal, unhealthy, reduced quantity of functional flow to "3", producing a reduced quality of educated thought values in "3".

Obviously, "4" will and can do only what "3" is capable of thinking for "4" to do, for "3" directs "4" what to do, how to do it. The level of reduction can be still further reduced below the level of Illustration No. 3, to where it is below a border line producing insanity which has no relationship to sanity in any respect.

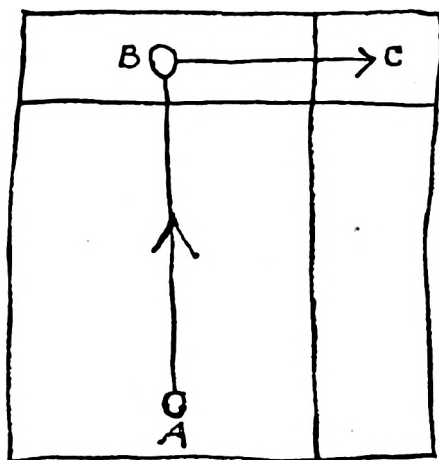


ILLUSTRATION No. 5

- A. Innate Body. Place of origin of sub-normal, abnormal, or unhealthy impression. Flows afferently only through afferent nerve to Innate Brain where Innate Intelligence interprets it equivalently as "pain".
- B. Innate Brain. Place of normal interpretation of abnormal "pain" impressions received from unhealthy body. This occurs only on afferent side of nerve cycle from Innate Body to Innate Brain.
- C. Educated Brain. Place of secondary "pain" acknowledgment, referred to it by Innate Intelligence on efferent side of nerve cycle between Innate Brain and Educated Brain. Educated Brain refers it back to place of origin of "pain" impressions, hence we educationally say we "have a pain in the stomach". There is no "pain" IN STOMACH "A". Pain is exclusively in "B", Innate Mind in Innate Brain "B". Educated mind in Educated Brain acknowledges "pain" only as it is referred to it by Innate Mind in Innate Brain.

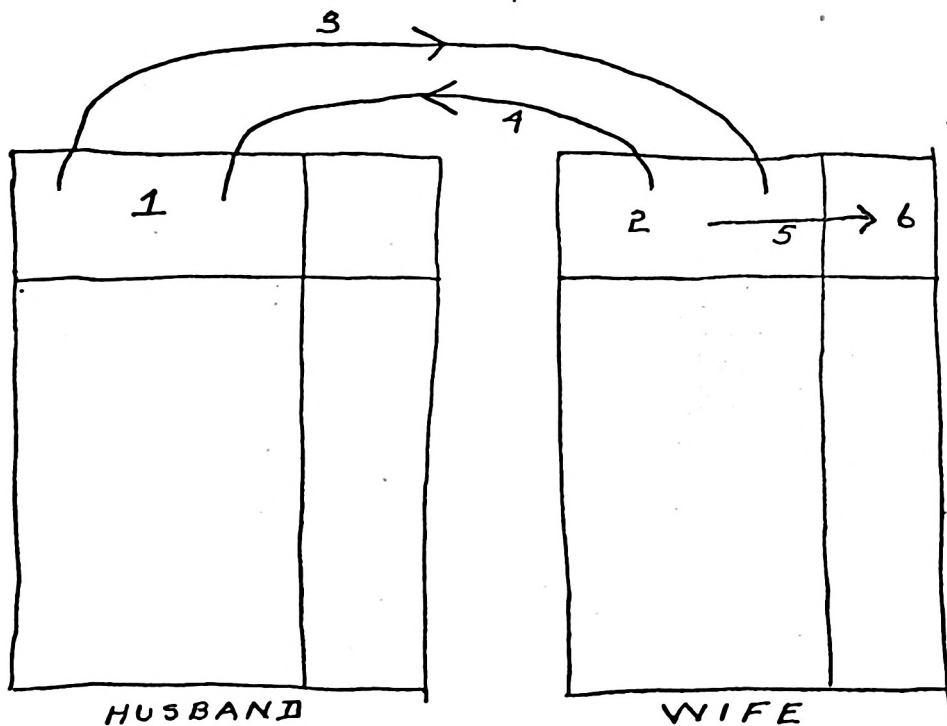


ILLUSTRATION No. 6

1. Innate of Husband
 2. Innate of Wife
 3. Communication from Innate of Husband to Innate of Wife
 4. Communication from Innate of Wife to Innate of Husband
 5. Communication between Innate of Wife to Educated of Wife, even to waking it up.
 6. Educated of Wife
- Obviously, this situation could be reversed from Wife to Husband, or from any one person to any other one, not related or known to be in communication.

Epigrammatic Law

"In the beginning, God."

"Know the truth and it shall set you free."

"The Kingdom of God is within you."

Law is normal, health, life, liberty.

Absence of Law is abnormal, dis-ease, death, bondage.

To encourage absence of Law is devilish.

To permit Law to express itself is Divine.

Law is life.

To know Law is to know Life.

To know Law is to work with Life.

To know Law one cannot work contrary to It.

Chiropractic is an analysis of Law.

Chiropractic is a process of knowing how to work with Law.

Chiropractic is a process of making abstract law a concrete fact.

Reality Without Physical Proof

If UI is Source; if UI is directing, controlling, and managing action of the Universe; if UI has successfully done this from beginning of intellectual control of actions of matter;

—IF there is no other Source in and behind UI which man's feeble intellect can conceive, understand, or fathom;

—even if man does not know much of, understands little about, and cannot prove existence of UI in a test tube, under microscope, or in other physics tests, he still is compelled to admit IT IS and IT DOES.

Regardless of name or interpretation of same, It governs planets, seasons, balances sexes, controls all time, space, distance, and other observed manifestations of a tendency to constructive perfection. Therefore, IT becomes THE beginning of man's understanding of the world in which he lives, and worlds about which he knows little.

Producer — Product — By-Product

Law—Universal Intelligence—is THE PRODUCER. Innate Intelligence is THE UNITAL PRODUCT. Ergo, Innate Intelligence becomes UNITAL PRODUCER with brain matter as its PROD-

UCT. Education, so-called, is BY-PRODUCT. Intellectual energy, flowing thru matter, is MATERIAL producer. Motion of matter is product. Education, heat, sensation, function, etc., are by-products. Clearly, flow is NOT from outward inward, from below upward. Yet education endeavors in every conceivable form to make it work that way. As a BY-PRODUCT it too frequently tries to advise, suggest, even to imploring and telling PRODUCER what to do, when, where, and how. Education is a BY-PRODUCT of Innate Intelligence flowing thru brain matter, as bile is a BY-PRODUCT of Innate Intelligence flowing thru liver matter. Nobody would concede that bile could talk back to liver—much less Innate Intelligence which flows thru it to produce it.

Flow from producer is from above downward. Innate Intelligence (producer) flows energy to muscles. Muscles receive energy and act (product). As a result of action, by-product heat. Nothing heat could do would increase quantity or quality of muscular action. Nothing muscular action could do would increase flow of Innate. There IS a law of demand and supply. As body gets cold, it demands heat; this demands muscular action; this demands Innate energy flow. Even here, Innate is THE ONE that receives impressions from cold skin, determines necessity, and proceeds to supply it from above downward.

Source is Constructive

In Educated man's concept, he thinks of UI (for the Universe) and II (for the Unit) as being perfect, normal, source of Life, exhaustless, without limit as to perfection, able to and does correctly and efficiently control and direct balances of all issues needing balance.

Everything IT does is constructive. It is Law of Life, Law of Health, Law of Sanity. Were such not so, Educated man would have no source to back up to, for that which he contends against which exhibited absence of any of its attributes, such as life, health, sanity. When Educated man thinks of death, dis-ease, and insanity, he backs to HIS source for opposites. Whether there is death, dis-ease, or insanity in Universe is a debatable question. If there is, man knows not its sublaxation or its adjustment. That there IS death, dis-ease, AND insanity in vertebrate units is obvious. Man does know sublaxation and its adjustment, in the vertebrate unit.

Can Education Boomerang on Source?

Education does presume to talk back to, up to, and desires to instruct Innate Intelligence. Producer needs no advice from ANY by-product.

From viewpoint of Law, one composite unit is equal to another. So far as Producer is concerned, all vertebrates are equal to each other. No one is superior to any other. There is no difference, to Producer, between cow and woman, horse and man. All have same functions—no more, no less; each performs alike, regardless of differentiations educated man establishes as seeming differences. Imagine a cow going to church edifice on Sunday and, on its knees, thanking Producer for rain, grass, and a calf; or wondering what is going to become of its Innate Intelligence when it has served its usefulness here and now. Can one conceive of a horse dolling up in Prince Albert, striped trousers, reading from printed book, giving thanks for digestion, elimination, health, and ability to reproduce its kind, and ability to live a healthy normal life. Yet man does all this and more, and worse. In making this normal comparison, no levity or disrespect is meant or intended to either biped or quadruped.

Educated man says educated man builds homes and bridges, makes clothing and covers his nakedness, establishes rights and wrong, goods and bads. True, man HAS builded a tremendous complex ARTIFICIAL educated state of existence, whereas other animal composite beings continue to live the simple NATURAL existence. Educated man says educated man has builded aeroplanes and travels ten miles a minute thru space and covers tremendous territory. And what has it gained him but to use that aeroplane to travel to other worlds to destructively shoot and kill other composite beings like himself, contrary to constructive law of Producer. Is man better off because *he has* "these advantages"? Is cow or horse worse off, functionally and naturally, as a product with its by-products, *without* these? Educated man says educated man has "a soul" which can be lost and should be saved to eternity. Statements along this line are theories and beliefs; none have been proven. Man has Innate Intelligence; so has every vertebrate composite being, even the quadruped. Same Innate that produced cow produced man. It is the by-product—educated intelligence—which says these things in attempting to reverse process backwards and upwards in observations.

Without Interference What Could Source Do?

If UI (or God) is source, as all religions teach us Thon is, then UI as source is THE normal life and health Source of all expression.

If UI could flow to an individual, freely without interruption or interference, THAT individual would express normal personification, be fully alive, and radiate health.

If UI could flow to ALL individuals, freely without interruption or interference, THOSE individuals would express normal personification, be fully alive, and radiate health.

If that principle be sane, sound, and sensible, and religions would so have us believe, its opposite would be equally sane, sound, and sensible, viz., any interruption and/or interference to a free flow of UI to any and all individuals would express an abnormality, dis-ease, and/or death.

If that principle be sane, sound, and sensible, and religions would so have us believe, in any or all individuals, restoration of UI would restore abnormality to normality, dis-ease to health, death to life.

The Triune Conflict

With all above as a preface, there are now determined THREE intellectualities:

1. Universal Intelligence.
2. Innate Intelligence which is a part OF and apart FROM, yet neither, but a Oneness of the Whole as manifested in Units, all of which comprise the totality.
3. Educated Intelligence, born at birth, observes, interprets, gathers from a minimum at birth to a maximum at death, all of which comes from II and is only as great as its useful drawing power from its source in the Unit which is the II of the Unit. If it uses little, it is little.

It is the third of these—Educated Intelligence—which observes, studies, tries to interpret, and desires to know ALL and be more than the superior Intellectualities above and beyond himself—UI and II.

One who KNOWS law lets law work! He never implores, begs, or advises law WHAT to do, WHERE to do it, or HOW. Neither does he pray to or thank law for "favours granted", or plead for "favours expected." Law is all-sufficient unto itself IF there are no interferences to its free, untrammelled, uninterrupted free flow of expression. (See Illustrations 2 and 3)

It was interference TO law which made manifest an abnormal expression—and this in the by-product opinion of the third degree of intelligence, which created a condition demanding treatment; thus, religion to TREAT spiritual ills of the abstract and/or medicine to TREAT physical ills of the corporeal. To correct CAUSE OF INTERFERENCE is ALL that is needed. Beyond that, law will take care of its abnormal expression. Educated man—by-product

third degree of intelligence, existing in third degree value—thinks it MUST reconstruct law to do its bidding with what to do, where to do it, or how to remedy abnormal effects. That man who knows nothing about any “religion” is as well off as is highest educated divine who thinks he alone holds the sacred key to unfasten all portals to past, present, and future of prolonging and redeeming man’s soul existence. Man, without sublaxation or interference to law, is actually better off as a medium of normal expression of law than is the divine who thinks he knows all, sees all, tells all; who HAS a sublaxation with interference and is a constant abnormal expression of interference between himself AND law. NORMAL man does not know he has organs or functions. It is only ABNORMAL which creates a demand for absent quantity in difference between normal and abnormal. It is abnormal which sets up a cry from wilderness where a man is lost for that which it has not.

It is proper and befitting that Educated man should look, study, and investigate beyond himself, into space surrounding, to try to know why HE is here, what HE is here to do, how HE fits into the scheme of things, how HE forms a part of the whole, and how HE can better personify its ultimate objectives.

Fault with Educated man, generally speaking, is that he has accumulated a speck of understanding, inflates it, and soon places it above and beyond his own source; develops an exaggerated ego, until intellectually and psychologically HE becomes the master of the Universe and all else are insignificant values, by comparison.

Principles vs. Practices and Vice Versa

We have said “and religions would so have us believe”, meaning this is what they PREACH Sunday and do not practice other six days of week; what physicians PRAY TO Sunday and deny other six days of week in medical and surgical offices.

Pungently apropos are comments found in lecture STUBBORN FACTS:

“The world today is in a mad and insane flux. It is manufacturing hate, developing revenge, killing men by millions. Everything, seemingly, is negative.

“Any religion teaches love, life, and liberty. Why have religions failed, after thousands of years? Because they are principles WITHOUT a practice; a mind WITHOUT matter.

“The world of sick people today is in a scrambled flux to reduce suffering, prolong life, keep from dying.

“Medicine is manufacturing disease, developing insanity, burying mistakes by millions. Everything about health, seemingly, is negative.

"Why has medicine failed after 5,000 years? Because it is a practice WITHOUT a principle; a matter WITHOUT mind."

Two Types of People in Conflict

There are two classifications of people: those who move into action by emotion, passion, or prejudice, and those who use logic, reason and facts. Sometimes the latter prey upon former by taking advantage of their weaknesses. Majority of people are superficial and glide thru life over surface of issues. They know not why and wherefore of things, care less, and so long as they get by, they appear satisfied. Stupidity or laziness oftentimes makes majority victims of unscrupulous minority. There is a small minority who are willing to sacrifice softness of life to secure factual data upon which to weigh problems and solve them. It requires no little courage for small class to speak convictions, when it opposes beliefs of great mass.

As a result of position assumed by mass, there has become established "an ethical procedure" of treating effects which has "become correct and proper procedure as a standard of spiritual or physical education in our theological or medical institutions". The mass appear afraid to jeopardize standing in community by stepping out of line. This applies to our work in difference between medicine which treats effects, and Chiropractic which adjusts cause. Most people are not cognizant or do not possess knowledge of a working practice of LAW behind CAUSE of effects. Once LAW is known, it equally applies into allied subjects, such as religions of various kinds.

Ninety-five per cent, and perhaps more, of people work and are worked upon by emotions, passions, and prejudices. Because of this primal moving factor, they are unstable, vacillating, variable, shifting from one thing to another. They try this and that; experiment; jump out of frying pan into fire; are always unsettled and changing with every old and new-fangled theory. This theoretical state of mind is what makes medical, osteopathic, or Chiropractic mixers. Remaining 5 per cent, or less, are people who work with logic and reason; they decipher evolved and involved law and its principles, and base actions along definite and fixed lines. Because they KNOW law, they work WITH law. LAW, being stable, fixed, constant, so are they. They follow a relentless line of factual thinking and acting because it is inexorable.

The mixer can no more help being a mixer than he could help being himself; for HE IS what HE IS because he inevitably directs himself toward theories and theoretical things not true and reliable. Show me how a person THINKS and I'll tell you what he'll think, say, or do under any circumstances.

Man is a duality of two characteristic functions—mental and physical—one producing thot, other producing action. Thot precedes action; action follows thot; each must balance other, if life, health, and sanity exist.

Is "God" a Male?

If II is Unital Source; if II is directing, controlling, and managing action of the vertebrate unit; if II has successfully done this from beginning of intellectual control of actions of composite vertebral units; if there is no other Source in and behind II, for the unit, that man's feeble intellect can conceive, understand, or fathom;—even if man does not know much of, understands little about, and cannot prove existence of II in test tube, under microscope, or other physics tests, he still is compelled to admit IT IS and IT DOES exist in the unit.

Regardless of name or interpretation, "*it*" governs the vertebrate composite unit, conceives, generates, and gives birth to, as well as balances sexes thru units, controls all vertebrate matter in which it lives, to the end of a destined attempt to constructive perfection.

Therefore, II becomes THE beginning of man's understanding of the man world with which he lives, and association of others like himself with whom he associates.

When man thinks of Source, where he came from, how he came, or where he goes upon death, he thinks in terms of The Great Spirit, Jehovah, or perhaps God. Thinking of "God" he has been taught to believe in a great heroic man, a He or Him *male* being with gigantic *human* possibilities. Man is prone to think of God in terms of himself, like himself, except only a greater self. Man tries to make God more man-like, when, in reverse, man should try to make man more God-like. We prefer thot of a Universal Law; therefore, being abstract without shape or form, the term UNIVERSAL INTELLIGENCE.

When man thinks of himself, and that within himself which makes him tick and run methodically and systematically, he calls it "nature", "instinct", or "subconscious mind", which is an evasion or refusal to acknowledge that within him is the same Law Source as is in the Universe—an Innate Unital Law; therefore, being abstract, term INNATE INTELLIGENCE.

A Practical Principle and Practice

In 1895, D. D. Palmer brought forth a NEW principle with a NEW practice, which attained a NEW result.

On the NATURAL, NORMAL side it was:

- if there were no concussion of forces, *accidentally* applied;
- if there were no vertebral subluxation;
- if all vertebral and spinal foramina were normally open to full size;
- if there were no pressure upon nerves;
- if there were no interference to any normal quantity flow of mental impulse supply between brain and body;
- if there were no resistance to any transmission of nerve force flow;
- then there would be normal quantity of and/or normal speed of action of all tissue cell structure;
- there would be normal function;
- there would be chemical balance;
- there would be functional, physiological, chemical health.

On the ABNORMAL side, it further was:

- a concussion of forces *accidentally* applied produced a vertebral subluxation.
- A vertebral subluxation occluded a vertebral or spinal foramen.
- The occluded foramen produced a pressure upon nerves.
- Pressure upon nerves interfered with normal quantity flow of mental impulse supply between brain and body.
- Pressure produced resistance to transmission.
- Resistance to transmission offered interference to transmission of mental impulse supply.
- This reduction in quantity flow created the beginning of ALL dis-ease, either functional, chemical, or pathological.

In verity, he further said:

- a concussion of forces *intentionally* applied reduced a vertebral subluxation.
- A reduced vertebral subluxation opened the vertebral or spinal occlusion.
- Opened occlusion released pressure upon nerves.
- Released pressure upon nerves restored normal quantity flow of mental impulse supply between brain and body.
- Released pressure reduced resistance.
- Reduced resistance reduced interference.
- Increased quantity flow recreated restoration of health to ALL disease—functional, chemical, or pathological.

—Diseases, as entities, were multiple; dis-ease, as a condition, was single.

—As entities, each had its own cure; as a condition, there was but one cure.

This is the 1895 PHILOSOPHY of D. D. Palmer's Chiropractic.

That principle and practice was either right or wrong. If right, *it was 100 per cent right*; if wrong, *it was 100 per cent wrong*. If right, it should be rigidly followed *in 100 per cent of cases*; if wrong, *it should be entirely ignored* and completely discarded. If right, *it would get sick people well*; if wrong, *it could not get anybody well*. If it got sick people well, it was right; if it failed to get sick people well, it was wrong. If it was right, there was not a 50 per cent vertebral subluxation cause for some diseases, and a 50 per cent germ, environment, diet, or other kind of cause for the balance of diseases. If right, there was not a 50 per cent INSIDE cause for some diseases, and a 50 per cent OUTSIDE cure for others. If right, there was not a 50 per cent vertebral adjustment restoration for some diseases, and a 50 per cent modality stimulation and/or inhibition treatment for others.

Chiropractic is either an ALL-inclusive principle and practice, or an ALL-exclusive principle and practice.

Chiropractic contains A SPECIFIC cause and a SPECIFIC cure for ALL dis-ease; or it contains NO specific cause or specific cure for ANY disease.

An Old Law Yet a New Law

In 1895, D. D. Palmer formulated a working principle and practice, attaining a *new* result which was *new* only to education and understanding of men.

That principle and practice is *new* to men. It is *not* new to itself, for it is as old as the vertebrata, biped, and quadruped. EVERY PERSON, REGARDLESS OF TIME, WHO EVER BECAME SICK, DID SO BECAUSE OF A VIOLATION OF THAT PRINCIPLE, REGARDLESS OF WHETHER THAT SICKNESS IN THAT PERSON LIVED PRIOR OR SUBSEQUENT TO 1895. Sickness as we know it today, with symptoms, pathology, and diagnosis, is not new. It has been repeating itself since dawn of ancient understanding. Transition in all men of all time, from health to sickness, was because of a concussion of forces wherein an external invasionary force overcame an internal resisting force, producing vertebral subluxation, occluding opening, producing pressure upon nerves and interfering with normal quan-

tity flow of nerve force energy between brain and body. Time does not change accuracy of that observed series of facts.

EVERY PERSON, REGARDLESS OF TIME, WHO WAS SICK AND GOT WELL, DID SO BECAUSE OF A CORRECT AND EFFICIENT USE OF THAT PRINCIPLE, REGARDLESS OF WHETHER THAT SICKNESS IN THAT PERSON EXISTED PRIOR OR SUBSEQUENT TO 1895. Fact that, previous to that, people got well and did not know how, does not change its correctness. Same "Nature" within us which cures today, cured yesterday. Transition all men go thru, from sickness to health, has been true of all time and was because of a concussion of forces wherein *internal resisting* force overcame *external invasionary* force, correcting vertebral subluxation, opening occlusion, releasing pressure upon nerves, and restoring normal quantity flow of nerve force energy between brain and body. Whether previous or subsequent to 1895, does not now change accuracy of that observed series of facts.

Millions have been born, covering thousands of years, and ALL were born alike. Miracles do not happen in births of babies. As babies are born today, so were they yesterday. Each had a father and mother. Conception and pregnancy are no new law. Millions have died, covering thousands of years, and all die alike. Prayers and beliefs cannot and do not change that process; all is carried out according to law of cause and effect. We die of natural old age, or we die at pre-mature age because of violation of law of living, thru sickness or accident.

One and Many

Reduce quantity flow of intellectualized energy thru one cycle and you have beginning of dis-ease, which is thot or functional insanity, which eventually leads to death in that unit. Multiply that and you have dis-ease in some arbitrary section of man. Multiply that until it includes totality and you eventually have death of composite man. Study of Law of Life is simple. Study of absence of Law of Life in dis-ease, insanity, and death is simple. (See Illustration 3)

Chiropractic teaches a vertebral subluxation perverts sanity to insanity. Chiropractic further teaches ANY function which is perverted is an insane function, whether it be mental or physical. Chiropractic teaches a vertebral subluxation perverts function to dis-ease. Chiropractic further teaches ANY function which is perverted is dis-ease, whether it be mental or physical.

Harmonious Jurisdictional Division of Labor

The division, quantity, and/or character of functional labor performed by Innate and/or Educated brain is separate, clean-cut, yet in minor particular seems interwoven. Innate brain generates all intellectual energy for all Innate *internal* organic functional purposes. Educated brain generates *no* intellectual energy for *any* internal organic purpose. Educated brain *can* direct a certain small quantity of intellectual energy given it by Innate brain, to be directed and diverted to certain *superficial* organic structures, at will, during waking hours only. Educated brain redirects energy given it by Innate brain to certain sets of superficial muscles which have to do with directing some portions of its body in its dealings with *external environment*, such as directed walking, rising, sitting, movements of arms, shifting position of head; etc. Educated brain also is given energy from Innate brain to recreate educated thots wherein we think upon *external* environmental conditions such as colors, heights, etc. Division of internal and external labor is clean-cut when general bodily plan of division of two kinds of function becomes clear. (See Illustration 1)

Inasmuch as Innate brain diverts a certain small portion of its *internal* intellectual energy TO educated brain for replanning second-handed thot upon *external* environmental affairs, it therefore becomes important to explore how far and where educated brain can use energy and where it cannot penetrate and go. Quantity and quality of Innate thinking, compared with quantity and quality of Educated thinking, are as the ocean compared to a drop of water.

Border and Sub-Border Insanity

Educated mind in educated brain can think within its sanity border line. It cannot think outside of that to Innate quantity and/or quality. Neither can it think below insane border line within itself. Within that superior section of educated sanity, educated brain can reconstruct thots by affirmation or denial of that which it thinks. It can't think wet is dry, high is low, hot is cold, even tho each is contrary to fact. It can deny the affirmed, and affirm the denial if it sees fit, so long as by so doing it does not invade internal functional field of Innate direction. It can think a sophistry as reality, can change a realism into theory. It can believe what it pleases—good or bad, right or wrong—so long as such again does not enter internal functional field of Innate direction. (See Illustration 4)

When we refer to “educated border line” between sanity and insanity, we mean a stressing point upon education; a stretching

of reason and logic; a definite breaking-point between ability to resist invasion of energy. When that breaking point is reached, sanity fades out and insanity fades in. Below breaking point, individual can no longer be educationally competent to think consistently. Above that border line, he can think and change, control, exaggerate, or annihilate his thots, within reason, at will. It is within this sphere we find prayer, religions, psychology, suggestive therapeutics, etc., at play within the playground, so long as such does not interfere with the seriously practical working of Innate in directing field of internal functional existence of human body. When Educated mind thinks it can direct internal function by changing it from what it needs, to what it wants it to be, then educated mind is and always has been stymied by Innate. (See Illustration 5)

In process of affirmation or denial of facts, it is possible for educated mind to so concentrate itself upon a denial that it can and does affirm it as fact, or vice versa. Example: "Pain" is a natural internal mental interpretation, in Innate and educated minds, of external abnormal physical condition, foreign to itself. An abnormal, efferent, organic condition will give rise to an abnormal, afferent, organic series of impressions, which, when interpreted by educated mind, would constitute "pain". It is possible, above educated border line, for educated mind to concentrate on something pleasant and deny "pain" being present or existent. Pain IS present if educated mind would admit what is. It is also possible, above border line, for same educated mind to concentrate upon something unpleasant and exaggerate a minor feeling of discomfort into a major one, and thus feel more "pain" than exists. Within reasonable lines, this mind, above border line, can suggest to itself *what* to think, *how much* to think, and thus affirm or deny existence of issues it is pleased to deny or affirm. It is in this field that educated mind is taught, trained, directed, and educated to do this or that to improve its attitude towards issues where it encompasses an environmental condition surrounding itself; and, within certain narrow limits, *seemingly* controls conditions internal to itself.

Certain ascetic ideas of "purification of the soul" or "mortification of the flesh" could be so highly exaggerated that ordinary and usual necessities of body could be practically ignored, and educated mind could and would justify all with exaggerated thinking. This, too, is within educated field only, all above border line. None, however, changes quantity or quality "of the soul", as Innate is above and beyond reach of anything inferior educated could think or do. Under this construction, it is possible for educated mind

to pray, ask for power, and so exaggerate thinking that it might think it WAS getting what it is not receiving, and thus believe all a reality. If any individual COULD pray for, ask, and receive what it wants, it would soon own and control the world. But none has yet set aside the producer law or any part of it, of which he is a product.

Inter-Locking Mysteries

There is a broad misunderstanding and mystery existing in the lay mind about that borderland between so-called subconscious and conscious minds. Many things are believed, most of which are not true. This is particularly so in the field of hypnotism, thought-transference, clairvoyance, and spiritualism. Without going into long discussions or elaborate detail, we shall explain each briefly as they here apply to our subject matter.

Hypnosis

In hypnosis, one educated mind SUGGESTS a line of thinking or action to ANOTHER educated mind. Second educated mind ACCEPTS suggestion, without opposition or prejudice; proceeds TO THINK upon it; and, thinking, acts. When second person DOES what first person suggested, public says "he is hypnotized." If second mind REFUSED to accept, or had opposition to or prejudice against, then hypnotism could not exist between. No second party CAN BE "hypnotized" against his will. Oftentimes, first mind must be firm, determined, and positive, to overcome passive non-thinking or non-acting state of second mind. This is often construed to be where "strong mind CONTROLS weak." There is NO "control of one mind over another." It takes one strong concentrated mind to be a hypnotist. It takes another strong and concentrated mind to accept a suggestion and act upon it. Insane, imbeciles, and/or idiots do not make hypnotists or subjects of same.

No subject would DO anything, nor could he be MADE do anything, under suggestion of another, which he wouldn't do under auto-suggestion by himself TO himself. If he would educationally consider murder by himself, then he would act murder at suggestion of another. If he cannot play a musical instrument, then no amount of suggestion of another makes it possible. Under suggestion of another, he might pick an instrument AND TRY to play it. It takes a strong power of educated concentration to give or take suggestions and act upon them. No weak educated mind works in either event. Sometimes a strong, positive, emphatic series of educated suggestions given by one person awakens a sleeping, latent, inactive, lethargic power of educated action in another—

an action which second person could as well do by himself IF he would think same strong, positive, emphatic series of suggestions by himself within himself. Some people are self-starters—auto-suggestion; others must be started by somebody else—a hypnotist. Under concentration, any man can SUGGEST MORE and, under pressure of concentration, CAN DO MORE than he usually does. It is THAT LITTLE MORE, done under concentrated power of suggestion, which mystifies people about hypnosis, hypnotism, and hypnotists.

What any person THINKS long enough and strong enough—whether suggestion to think comes from foreign sources or auto-suggestion—makes it a MENTAL reality SO LONG AS HE THINKS IT. Example: suggestion of folding hands AND CONTINUING TO THINK YOU CAN'T OPEN THEM. So long as one thinks he CAN'T open them, he CAN'T. Moment he thinks he CAN, he does and he will. So long as one THINKS there is NO PAIN, he can and DOES suffer pain, even tho HE CONTINUES TO THINK he DOES NOT have pain. So long as he THINKS he is a child and a broom is a hobby horse, and he romps with one, he IS a child and acts like one. TRUTH OR CONSEQUENCES—a radio program—is an example. Home parties and home games are further examples.

Thot Transference

Anything and everything that ACTUALLY happens because of LAW which made it happen can be factually explained BY LAW when correctly interpreted. Difficulties lie in accurately securing facts and wading thru mysteries of misunderstandings in reporting instances by credulous people who wrap in endless mazes of mysteries. (See Illustration 6)

Example: husband, traveling man, asleep on Pullman hundreds of miles from home. Railroad accident, wreck, killed, etc. Wife asleep at home. Time, about midnight. Wife wakes up from sleep with full realization of ALL circumstances which she recited IN DETAIL to two daughters. Eight o'clock next morning, telegram verified wreck which mother described night before, AT TIME of wreck. So-called "dream" or "nightmare" which proved accurate took seconds to receive, which would have taken hours to occur in fact.

This ACTUALLY happened, therefore A LAW made it happen. It CAN BE factually explained BY LAW. What is explanation for perfect thot transference between husband and wife, separated hundreds of miles, when both occurred AT SAME TIME? Both educated minds WERE ASLEEP. Two Innate Intelligences were

awake, active, running functions, mental and physical, in both bodies. Both Innate Intelligences were alert and en rapport with each other. His Innate communicated with her Innate. Her Innate, in turn, woke up her Educated and vividly communicated to her Educated the circumstances. (See Illustration 6)

There was NO OTHER WAY that transference COULD happen. Same COULD happen during waking hours PROVIDING Educated minds became subservient to the Innates, so that when Innates WERE in communication, one Innate could get thru to its Educated mind. Placing Educated mind in a quiescent state is sometimes called "going into a trance", which plainly means that Educated is endeavoring to blank itself out for time being, so Innate CAN communicate with Educated.

Spiritualism

Spiritualism is divided into justification for existence, as a religion, by many portions of the Holy Bible. This we do not discuss. It has as much right for existence, in its beliefs, as any other. We do question honest presentations.

Having researched this field for many years, we do know that 99 9/10 per cent of that phase of this subject is fake and fraud of rankest character. We have never seen ONE materialization that can be truthfully said to be communion between any living person and someone who once lived, but has now departed from this earth. We say this notwithstanding millions believe to contrary, often citing instances of where they THINK it was true and a genuine manifestation of mediumship. All such is told because of previous knowledge of the subject, or information gained thru "the spiritualists Blue Book," or is so general in application that a clever person could do as well.

One-tenth of one per cent that IS real is a genuine manifestation of that transference. We have known TWO persons who could and did bring forth ITEMIZED truthful, detailed data, authentic and proved true—past, present, and future. Even this can be explained by LAW of that transference. What HAS happened or is in THE PRESENT can be understood; but what many cannot understand is THE FUTURE. When it is recalled that this Universe is governed by law, and all is foreordained and known, that all is working to a definite end which we educationally seldom understand or know, then to look into that future is but to look to THE LAW which IS that future. It is a blessing in disguise that few possess that ability.

Sleep

Two conditions exist when one is normally "asleep":

1. All internal functions continue. Food continues to be digested and assimilated; fractures continue to be repaired; body continues to be warmed or cooled; organs continue to grow, etc. During "sleep", Innate, having full, complete, and unmolested control, gets in best work rebuilding fatigue to rest, or sickness back to health. One hour of natural "sleep" is worth many hours of artificially forced drug sleep. Innate Intelligence continues functions twenty-four hours without cessation.

2. ALL EDUCATED understanding and function fade out. Educationally, individual is normally non-conscious rather than pathologically unconscious. Educated mind and sequential body action are blanked and cease. We awaken with an educated time gap between.

In process of normal change from "awake" to "sleep", Innate Intelligence always voluntarily, sometimes deliberately, oftentimes spontaneously and abruptly, withdraws all nerve energy current flow between Innate and Educated brains. This induces and produces a completely blank educated brain and mind, a condition which IS "sleep". Reverse is equally true. If a little current SHOULD abnormally leak thru, from one brain to other, then and there is where "dreams" and "nightmares" come. In exact ratio as there is an abnormal leak during "sleep" period, so is there also same abnormal ratio of leak from one brain to other during "awake" period. During waking hours, we call it "DAY-dreaming". In both instances it is a phase of aphasia or insanity. In exact ratio as one dreams at night, one is insane. Degree of leak predetermines degree of dreams or insanity. Exaggerated phase of dreams or insanity is brot about by the little of the leak trying to fill space in which much should be working.

Man, in his desire to express degrees of transition, normal and abnormal, speaks of them as "sleep", "coma", "asphyxiation", "drowning", "death", etc. These comparative terms express ONE condition brot about IN SAME WAY, except bodily condition changes, even tho adaptative action on part of Innate remains same. Each is a NORMAL action on part of Innate, based on varied ABNORMAL bodily conditions.

A "faint" may be momentary or continue for hours—complete or incomplete. "Coma", "asphyxiation", because of poison, ether, chloroform, etc., change body necessity. "Death" is a PERMANENT withdrawal of Innate from even Innate brain when, in opinion of Innate, body no longer is a habitable place. Gas, poison,

and water DO NOT produce "death". Withdrawal of Innate from a body in which she cannot live, does.

Innate cannot live in a body overloaded with more gas, poison, water, etc., than Thon can absorb and eliminate—therefore withdraws. Any condition a living body gets itself into, which interferes with full and free working of Innate IN that body, would first bring about a lethargic drowsiness, then "sleep", gradually grading it down even to "death." IF LESS THAN "DEATH", it was done to utilize every function to continue to possess full command of that body to rehabilitate itself. IF MORE THAN "SLEEP", it was done because Innate tried hard but could not rehabilitate itself to live any longer IN that body.

One? Two? Three?

We have discussed what appears to be three groups or classifications of sick people. Difference is but degree in two groups, and a difference in location of third. Smallest group are chronic indigents—those laid up and incapacitated with disease of organic or functional types, incompetent to earn daily keep, unable to use organic bodies sufficiently well to do constructive physical work to earn daily bread. This group represents effects of interferences between Innate brain and Innate body.

Second, next smaller group, would be those mentally sick who are BELOW border line—the insane, most of whom would be either unsafe to be at large in society or unsafe to their own persons or property; who are housed in private or public institutions. This group of incompetents is incapable of earning keep or livelihood, mentally or physically, notwithstanding some might be physical giants and mental pygmies, therefore no mental direction to their safe physical use. This group could not pray, and prayers uttered for them would not restore sanity. This group represents effects of interferences between Innate brain and Educated brain, with greater degree of interference.

Third, and by far largest group, is in neither of above classes. They are up and about, earning living, go to work daily. None of them think to fullest capacity or work to maximum capability. All are struggling below par without realizing it; live inferior to superior top of human capacity and superior to inferior border line, yet below highest healthy mental and physical rating, perhaps not even down to border line. This group has a tremendous playground between top and border line, ranging up and down daily scale. This group represents effects of interference between Innate brain and Educated brain, but of minor consequence compared

to second group. It is oftentimes questionable where third group slides into second group, or second slides into third. It is this third group, including everybody more or less, which feels necessity for a spur—something they can get their educated mental teeth into, something they can tie to or hold on to, to tide them over precarious position they realize they are in, of getting up and out of where they are, trying to reach a better and safer ultimate of where they feel they need go and see others attain. This is the pitiful group. Mentally below par, they realize it. Mentally seeing par, they desire to secure it. It is this group which seeks solace in religion, feels need of prayer, asks for something more, grasps into space for more strength to pull up and over the hill of greater mental and/or physical strength.

It is established, in principle and in scientific proof, that matter moves in ratio to quantity of energy to move it. It cannot move outside that range, time being intermediary fixing factor. Temporarily, quantity of energy can be stimulated; it can also be inhibited. Research with the electroencephaloneuromentimpograph establishes fixed fact that stimulation robs Peter to pay Paul; we can borrow ahead and pay later by a reduction, time again being balancing factor. Every stimulation lasts so long, then goes into an inhibition. Every inhibition which starts that way, ends that way, except lower down the scale.

There are many ways of stimulation: chemical, electrical, thermal, manipulative, etc., and to this list we add another—mental. We *can* educationally THINK stimulation. If we do, we will also run into the non-thinking inhibition which inevitably follows. We can also think inhibition and slow activity. Sooner or later, the pendulum swings and strikes original level, determined by quantity of energy which CAN flow as predetermined by interference of vertebral subluxation.

Educated that can be passive or active. Educated that can exist as itself without action. Educated that can be impregnated with force and made to act. Impregnation of force into educated that can be pessimistic or optimistic. Educated that force can thus “stimulate” or “inhibit” action. As true with any external agency, so is it true with internal agency; any agency which stimulates sooner or later, later than sooner inhibits as well. So does any inhibitory agency start with inhibition. Heat or cold, drugs of opposite character, electricity in small or large doses, mechanical applications of mild or violent quantities, all are either stimulatory or inhibitory. Sooner or later, all means so used become inhibitory because they “block” nerve force flow and thus slow function. Educated that can be made into force to do the same—up to a

certain point—within range of its possibilities of directing energy that is not interfered with because of vertebral subluxation. It cannot direct more than is, neither can it demand more than is, but that which is can be directed to produce both negative or positive action, pessimistic or optimistic, and it is within this range that educated man can play with, think about, and use to accomplish educated desires.

Religious Production and Reduction

That a person gets sick because of a PROduction of vertebral subluxation is admitted by Chiropractors. It IS the Chiropractic concept. That sick person goes to a religious shrine—and it doesn't matter which religion becomes involved—and gets well, is called "a miracle" because sick one prayed and believed in that form of religion. Law of cause and effect is alike on PROduction and REDuction sides of that issue. When a bystander to these transitions understands law of cause and effect, miracles, prayers answered, beliefs, all give way to knowledge of action of understood law.

That same person who went to a shrine and got well could have gone to a Chiropractor and gotten well WITHOUT miracle, prayer, or belief of any kind. Insane people and children do—and THE LAW works. Those people who go to shrines and do not get well could still go to a Chiropractor and get well—for THE LAW still will work. SAME LAW that worked as "a miracle" at a shrine is SAME LAW a Chiropractor intentionally makes possible. Difference is that at a shrine an *accidental* adjustment took place, as result of an *accidental* concussion of forces taking place as result of high internal tension and great emotional stress. With Chiropractor, it would have been an INTENTIONAL adjustment given at right place, at right time, and in right way, without necessity of tension or stress. More cases, of worse conditions, go to Chiropractors today than to any and all shrines. THEY get well! If what happens at shrines ARE "miracles", then Chiropractors by same rule are producing same results. Should such be called "miracles"? Chiropractors do not so call them because we KNOW how and why results ARE attained.

Thinking and acting of matter in motion, in man, is a study of resistance and invasion; resistance from inside out, and invasion from outside in. If man is logical and uses straight-line thinking, desires factual data and reliable facts, he finds himself surrounded with problems unsolved because he lives in a world of reliable facts that observed and realized problems were, uses same analytical break-down process desiring to SOLVE them. If he solves them, he finds himself surrounded with social, financial, and religious

problem invasionary forces at work to break him and his solutions, hoping to force him back into line with conditions existing when problems were such before they were solved.

Having solved problems, one by one, man finds himself on two horns of another dilemma, viz., first, to slide back to common type, pursue the way of multitudes and thereby become inconsistent within himself; or, second, to pursue new-born solution method, pursue way of isolationist, and thereby be consistent within himself. This that applies to Chiropractic and Chiropractor. Students enter Chiropractic schools. They come inundated, saturated, and infiltrated with medical problems of sickness, curing them, treating symptoms, cutting out pathologies, germs, and what have you. They here go thru a revolutionary process of straight-line thinking, nothing is taken for granted; evolution is the order; fearless searching for truth; securing and tabulating facts upon which to base new action. They learn CHIROPRACTIC and become a new order of CHIROPRACTORS. They return home to their fields of putting this into practice. They now are face to face with the stubborn reality that vast multitudes they come to serve and save, to prolong human life and get sick well, are living within medical problems still unsolved. Which way, now, will this new-born Chiropractor react? WITHIN HIM is Chiropractic solution to sickness and medical problem. HE can invade field of medicine with Chiropractic, or he can yield and let medical problem invade him. In one instance HE breaks down medicine, HE proves stronger in resistance than does medical invasion. In other, medicine breaks HIM and proves to be the stronger invasionary force, for his resistance is weak.

Two further problems arise: 1st, necessity of health service to get sick well; 2nd, necessity of earning a livelihood. He MUST get sick people well and DELIVER results or he will have nothing and nobody to serve. Failure to do this means professional failure to justify financial existence with a new principle and practice. He is surrounded by people who do not believe what he says, who think it wrong, who believe sickness can be cured, germs do cause disease, cause of all disease is not one vertebral subluxation in the neck, and adjusting that alone will not get them well. So long as he KNOWS what HE can do, and THEY BELIEVE what THEY do, demands education from HIM TO THEM. Failure to do this means professional failure to justify financial existence to earn a living with a new principle and practice.

Trend of this story bears largely on religion, which is also a problem. We are surrounded by people who BELIEVE in efficacy of prayer; that they can and do talk to God, God listens to them

and answers their prayers—sometimes. If they are sick, they can pray to God and God will make them whole. They do not reason that, so long as God cannot get thru an obstruction, God cannot heal. Neither do they use logic that God is superior and their education that prays is inferior, and inferior cannot talk to superior. Does Chiropractor resist possible invasion of demands upon God by prayer as against Chiropractic adjustment, restoring natural internal potentials that are there IF they can act? Or, does he take hardest path and explain how law works, under what conditions it works, under what conditions it cannot work, and how sick people do get well—prayer or not, to contrary? Verily, to live WITH CHIROPRACTIC is a question of resistance and/or invasion as to which does which to which.

Where We Live

Imagine man in his modern home. When built, it was electrically wired. Attached to one end of two wires is a dynamo generating electricity. Attached at other end are various electrical appliances, such as globe. Between the two flows a continuous electrical energy, willing, ready to perform service, including light, IF it can flow continuously from one to other. A continuity flow thru a continuity of matter equals a continuity of function. Suppose a man of the house WANTS light. Is it necessary to utter a prayer to eternal fitness of electrical set-ups TO ASK for light? Or, is it necessary to turn on button, knowing electricity WILL flow unhindered thru wires to globe? With or without prayer, he will GET light, providing he does what is necessary TO GET light. Man who prays, asking for it, and man who does not pray and does not ask for it, gets same light, providing BOTH DO SAME THING, same way, which makes it possible. NOW he HAS light. Is it NOW necessary to utter a prayer OF THANKS for having received light?

Fact that there was a need for light, dynamo was generating, wires were transmitting, and globe resisted current flow, brot forth white heat with white light. Nothing miraculous about that. It followed rules of law. Neither was it previously or subsequently necessary to transmute any of this into a mixture of "miracle" to account for it.

Imagine man in HIS human home. His brain is his dynamo, nerves are wires, muscles are motors. He was completely and correctly "wired" for "human electricity" before he was born. His human "dynamo" started running at birth. It will continue to run until he dies. His "dynamo" generates, "wires" transmit, and "motors" perform all necessary human function, providing current flows from brain to body. A continuity of brain to nerve, nerve

to tissue cell, tissue cell back to brain, with a continuity of mental impulse supply, creates *all* human functions. Between brain and muscles flows a *continuous* current, willing, ready to perform all functions OF LIFE, IF it can get from one to other. Man NEEDS LIFE in all parts of his human house. Is it necessary to utter a prayer to eternal fitness of things TO ASK for life? It is necessary to adjust subluxated vertebra, knowing nerve force will flow thru nerves to muscles? With or without prayer, whether he prays this way or that, right or wrong, or does not ask at all, his body will get it, providing each DOES SAME THING SAME WAY, which makes it possible to get from where LIFE is to where LIFE is needed. NOW he *will* have life. Is it NOW necessary to utter a prayer OF THANKS for having received life? Sick man who NEEDS life, and has his subluxation adjusted, gets it whether or not he prays FOR or gives THANKS after having received it. Chiropractor who gives adjustment permits life to flow whether or not he prays FOR IT TO FLOW or gives THANKS AFTER IT HAS. That there was need for life, that brain was generating, nerves were transmitting, and muscles received current, brot life action. There is nothing miraculous about that. It followed law. Neither is it necessary to transmute any of this into a mixture of "miracle" to account for it.

Production and Reduction

Underlying condition whereby vertebral subluxations are PROduced is simple, viz., two forces are in opposition, one overcoming other. A person, in WAKING hours, if caught off guard, is more or less relaxed, where internal resistance is low and invasion great; or external invasion is greater than a strong internal resistance can absorb; in other terms: when internal contraction is great and external invasion induces a greater contraction than it can counteract; in still other terms: when internal relaxation is great and external invasion induces a greater contraction than it can counteract in that instantaneous period of time.

Vertebral subluxations are REDuced by same process. Adjustments CAN take place when person IS ASLEEP and is most relaxed, and demand is made for a sudden Innate internal resistance which takes advantage of opportunity to REDuce same; or, where Innate internal resistance, during WAKING hours, is greater than external accidental invasionary force. *Any* concussion of forces, induced by *any* form of strain, struggle, accident, fall, wrench, could clash where internal resistance was overcome by external invasion, or internal resistance overcame external invasion; whether caused by

accident or directed or misdirected intentional application of a Chiropractor, could REduce a vertebral subluxation.

Two forces meeting in a vertebrate cause concussion of forces. It is called shock. Shock can be minor or major, in volume. Shock can occur in sleep or waking hours. Shocks PROduce and/or REduce vertebral subluxations. Two forces meeting on common ground at a focusing point can violate continuity of contiguous osseous structures and PROduce or REduce a vertebral subluxation.

Relaxation is a form of lowered external invasionary force. If external invasionary force is low, as would be true in relaxed state, it would take little internal resistance force to PROduce or REduce a vertebral subluxation. It is a question of which of two forces predominates in violence or passivity as to which might PROduce or REduce. If internal relaxation is at maximum it takes little external invasionary contraction to PROduce or REduce. Shock need not be violent in such condition. It might be so slight or mild it would pass unnoticed or even unknown. If internal contraction is at maximum, it takes a much greater external invasion to PROduce or REduce vertebral subluxation. Shock would be violent in such instance. It would be noticed and marked. Whether or not any concussion or shock PROduces or REduces vertebral subluxation depends upon direction and location of opposition of one force to other, regardless of whether it be accidental or intentional. It depends upon which is internal or external and intensity of either in overcoming its opposite. This principle is not new. It is old. IT HAS BEEN OCCURRING ON EVERY PERSON WHO EVER GOT SICK OR WELL, REGARDLESS OF FACT THAT THIS PRINCIPLE AND PRACTICE WERE NOT DECIPHERED FROM OUT OF THE WOMB OF TIME UNTIL 1895.

Contraction and relaxation are opposites in normal, as contractions and prolapses are opposites in abnormal conditions. Contraction is necessary to perform normal motion. Relaxation is necessary to permit normal renewal, rebuilding, and recuperation. If we live normally, one must balance other. In quantity, there must be as much relaxation as contraction. Animals live a natural balanced existence. Man? Heavily unbalanced, straining, struggling, fighting, with far more tension and strain than relaxation; hence man lives in large part, during waking hours, in a continued contracted state. Often he finds it difficult to get off this strain. That is why sleep is essential, of which he generally gets too little, working and living under artificial external stimulated forms. Sleep brings relaxation and relaxation brings a tendency to *natural* vertebral subluxation adjustment, so that one may more nearly offset other. Even then, it is about sixteen hours of artificial contracted

labor as against eight hours of natural relaxed rest. Each hour of natural relaxed sleep must usually do triple duty to catch up.

Many an individual has had an accidental concussion of forces and gotten sick, and didn't know principle he violated, therefore didn't know why or how he got sick. Many an individual has had another accidental concussion of forces and gotten well, and didn't know principle he worked in harmony with, therefore didn't know why or how he got well. Physicians claimed credit, drugs were claimed as cure, treatments of many kinds have been called elixirs. We have thousands of cases on record, citing examples.

Many an individual has gone to bed normal and gotten up with a violent headache, sickness, heart trouble, etc. Many another individual has retired with headache, violent heart action, sick at stomach, etc., and awakened next morning without such. In one instance, relaxation made possible a concussion of forces which PROduced a vertebral subluxation. Resistance was overcome because of twisting, turning, and squirming during sleep, and a vertebral subluxation was PROduced. In other, it REDuced subluxation. Innate resistance, because of twisting, turning, and squirming, overcame vertebral subluxation and it was REDuced. It takes little effort on part of Innate to REDuce subluxation when patient is completely relaxed. Any doctor knows that one hour of NATURAL sleep accomplishes more return of health than ten hours of artificially forced drug sleep. He knows that "nature" works better when one is asleep. Sleep is "nature's sweet restorer". Why? What is principle at work? Sleep is Innate's opportunity to relax, making possible a REDuction of vertebral subluxation, a greater releasure of pressure upon nerves, permitting a greater flow of mental impulse supply.

Relaxation is vital to REDuction of vertebral subluxation, whether accidentally or intentionally induced. A Chiropractor induces NATURAL relaxation on part of patient as a part of his adjustment procedure. It materially helps to make a more natural adjustment because it gives Innate a greater opportunity to use less internal resistance to more correctly reset vertebra to normal position. Chiropractor designedly has patient assume a lateral lying posture, and a lateral posture table which induces more natural relaxation. More patient can and does internally relax, less invasionary force is necessary on part of Chiropractor to overcome internal resistance, making it more possible for Innate of patient to more naturally recoil or react upon invasionary force of Chiropractor, and thus more naturally correct vertebral subluxation into alignment. Same principle applies when patient is asleep, except that in one instance resistance force occurs internally at a time and

under a condition of sleep relaxation. In other, invasionary force is applied at a wakeful time and under a condition of external artificially induced voluntary relaxation.

If vertebral subluxation can be and sometimes is Reduced during periods of relaxation, awake and asleep, what is more natural than that a person should help by placing himself in an atmosphere of poise which induces relaxation and possibly having a vertebral subluxation accidentally adjusted in part or completely, in a certain percentage of cases? What is more restful, soothing, comforting, and relaxing than atmosphere of subdued lights, quiet and peace of a church, wherein patient endeavors to mentally and physically become en rapport with higher sources, with nothing to disturb or break tranquility of himself with the turmoil, strife, struggle, and friction of outside world? Many will enter a church and come out better. Others will enter church and come out same as they entered. Law will work with some and not with others. What about a turkish bath or body massage? There is no remedial, healing, or curing value in such, but it does induce relaxation and that makes more possible a natural internal correction of a vertebral subluxation. Some will take such and come out better; others will come out same. What about banks of a cool stream, banks of a lake, lying upon grass looking up into peaceful and soothing floating clouds, birds singing? What could be more restful to a tired, jagged, sick, worn-out body than resting on a couch in The B. J. Palmer Chiropractic Clinic Gardens, listening to fountains of water playing over rocks as they tumble back into pools, watching fish jump and play, surrounded by growing, healthy plants and flowers; noise of nearby city shut out; thus permitting oneself to commune with greater forces within?

What matters it where the place, so long as he permits LAW OF RELAXATION to come to his aid with the hope that possible vertebral subluxation MIGHT BE adjusted? For this reason, QUIET REST ROOMS are an aid, following an adjustment given intentionally by Chiropractor.

One man goes to church, prays, gets well, and credits prayer. Another goes to woods, prays, and credits prayer also. Another goes fishing, gets tired, takes a snooze, gets well, and doesn't know where to place credit. Another takes drugs and gets well. Another falls, gets up stunned; in a few days he is well and credits the fall. Another gets well without doing anything. Another goes to a shrine, Christian Scientist, osteopath, gets well. Variables multiply without end, as a collection of thousands of "ACCIDENTAL CAUSES AND CURES" reveal, gathered from newspaper and magazines, covering years. Man has been medically educated to seek EX-

TERNAL agencies causing disease, such as germs; or he credits some EXTERNAL agency—such as intervention of prayer or some foreign Saint, as at a shrine—for his cure. He talks about “nature cures” and he knows “Nature” is within, yet ignores it when seeking an external explanation of fact of cause or cure. Weaving thru all explanations offered are millions of variables—no two alike. Also weaving thru them, in which there is NO variance, IS A COMMON CONSTANT DENOMINATOR, one feature that IS same IN ALL, from which there is NO variation—concussion of forces, sleep or awake, relaxed or contracted, accidental or intentional, in jungle or crowded city, with educated or ignorant, which ALWAYS applies to INTERNAL cause and cure, which offers a SIMPLE and SINGLE explanation of how dis-ease comes and goes, whether second man does or does not intervene—the law WITHIN man!

It is not the bended knee or words uttered in prayer in a church that count. Neither are the green grass or floating clouds of beneficial result. Reclining couch adds nothing to his getting well. But the law of natural internal relaxation makes natural internal contraction of a more nearly normal adjustment a greater possibility.

There is a law of life and living, of disease and death. If man KNOWS that law and works WITH it, he would be more normal—barring accidents. If man does NOT know that law and VIOLATES it, he will be abnormal, including accidents. Time does not change law, regardless of whether yesterday, today, or tomorrow. Law of life and living is simple. Barring vertebral subluxations, he will be well. Law of disease and death is equally simple. Having vertebral subluxation, he will be sick. EVERY MAN OR WOMAN WHO HAS EVER BEEN SICK, REGARDLESS OF KNOWN OR UNKNOWN DIAGNOSES, WAS SICK BECAUSE OF VERTEBRAL SUBLUXATION WITH SEQUENTIAL EFFECTS. EVERY MAN OR WOMAN WHO HAS EVER GOTTEN WELL FROM ANY SICKNESS, REGARDLESS OF KNOWN OR UNKNOWN DIAGNOSES, GOT WELL BY VERTEBRAL ADJUSTMENT. Physicians have been playing with theories of EXTERNAL causes and cures of sickness since man began studying man; but from beginning of man's knowledge of man, none have deciphered THE LAW, PRINCIPLES AND PRACTICES OF WHICH LOGICALLY EXPLAINED WHY OR HOW such took place. It is THAT LAW AND ITS PRINCIPLES AND PRACTICES WE HERE PRESENT.

We find no fault in relaxation IF purpose and manner of reduc-

tion of vertebral subluxation are clearly understood to come from means FROM WITHIN, not from means from without.

Easy or Hard Ways?

Path of hardest resistance is to locate Source, REDUCE INTERFERENCES, and let Source pursue normal values. We can shout "Glory" and "Hallelujah" mildly or vociferously, for hours, and the mind will still be sick because of interference between it and Innate Intelligence. Sick person, suffering pains of the damned, can curse between now and then, and he will still suffer because of interference between his body and Innate Intelligence. Neither can get more Source flowing into his body because of shouting or cursing. Neither will get more than law CAN express, because of resistance to transmission or interference in reduction of normal supply in either instance. Shouting and cursing treatments relieve educated mental tension, but they in no sense are a restoration of normal transmission. This cannot come about without adjustment of vertebral subluxation.

The Great Divide

At funeral of a dear one, preacher says, "Here lies the remains—", thus separating matter from mind. Mind has gone, but matter remains. We speak kind words for what MIND has thot, said, written, and printed, and we lay MATTER away in the ground.

It is obvious that if II leaves living body, its source is shut off from matter which expressed it. Living man is "dead". It is equally obvious that if SOME OF II is cut off from SOME OF its expression, living man will be SOMEWHAT paralyzed. It is further obvious that DEGREE AND LOCATION of that interference and interruption between source and its organ or organs pre-determines DEGREE AND LOCATION of paralysis in that or those organs.

So long as cause exists unknown, undeciphered by man, and effects come therefrom without man knowing why or how, man will always be the master student and practitioner of treating effects; thinking, hoping, and praying that in some unknown manner he can do something, some way, and eliminate them and bring man back to a normal, healthy state as law intended he should be. Such state of mind knows no law because it knows no cause. In this particular group are psychologists practicing psycho-therapy—mental therapists. Specifically, an outstanding group are Christian Scientists. They believe bodily sickness a result of wrong thinking. Right thinking will cure disease. They advocate "getting thots in tune with the infinite." "Infinite" is the Unital Innate producer

and "thots" are educated by-product. They believe they can and do think themselves sick, and can practice thinking themselves well by using a controlled educated mental by-product. They think that by using educated mental by-product in some "wrong" way, they can and do upset and change normal Innate producer into an abnormal body product, thus manufacturing dis-ease. Or, if abnormality exists, they can, by use of educated mental by-product, change abnormal Innate body product to normal. Paradoxically, they thus admit Innate producer, as a normal source, IS the normal made abnormal; and Innate, as a normal source, IS the producer to go to to secure normality, thus setting it up as THE source of normal. Peculiarly, educated mental by-product is within itself frequently sub-normal in thinking values. These people never explain how it is possible for insane to change insane sub-normal values to sane par thinking, by asking for sanity; or how little children who have not yet learned to think can change sickness to health. For these groups, another outsider does thinking, hoping and praying FOR them, thus trying to externally reach into another body to correct its effects.

As a practical example, let me cite this article:

"Scientists believe THE MIND may be responsible not only for certain types of cancer but for stomach ulcers also. So long as CONSCIOUS PART of the brain is normal, the messages IT SENDS to sub-conscious brain are harmless; but if wrong messages are dispatched DOWNSTAIRS to the lower brain, that organ, too, GETS CONFUSED, RELEASES WRONG ORDERS to two nerve networks and causes disorganization which can so affect the cells as to cause disease. By sending SHAKEUP ORDERS over these networks, SCIENCE BELIEVES it can restore cells to health.

"Jolting The Nerves to Help Cure Cancer"

New York American, April 24, 1938.

Altho a newspaper article, which frequently gets correct detail badly mixed, nevertheless ideas advanced are so far-fetched that they need unraveling and proper classification.

Living man has TWO minds. Which of the two—Innate or Educated—"may be responsible" for cancer? Let us state the premise two ways: First, medical: "So long as the conscious part of brain (Educated) is normal, messages it sends to sub-conscious (Innate) brain are harmless. But if wrong messages (cancer messages) are dispatched downstairs to lower brain (Innate brain), that organ (Innate brain) also gets confused (becomes cancerous), releases wrong (cancerous) orders to the two nerve networks, and CAUSES disease (cancer)." Second, Chiropractic: Neither Innate nor Educated brain can THINK cancer and CREATE cancer in any cell. An interference to nerve force mental impulse current between healthy-thinking Innate brain TO to its Innate body, CAN create

cancer in cells. No amount of "shake-up orders" from conscious (Educated) brain "over these networks" can restore these cells TO HEALTH. Health is not produced by THINKING health. That is ALWAYS thot in Innate brain. "Science" may "believe" this, but it cannot be proved by "science."

"The two kinds of nerves about which most people are reasonably well informed are those which act in close connection WITH CONSCIOUSNESS. One of these kinds includes the so-called motor nerves, over which impulses that move the muscles travel FROM brain TO each muscle concerned. The other kind includes the sensory nerves which carry messages INWARD instead and supply the brain with the signals of all the senses."

"The fourth part of the nervous system, equally UNCONNECTED WITH CONSCIOUSNESS OR WILL, consists of a series of nerves which leave the spinal cord up and down the backbone and run to the same internal organs as those also supplied with nerves from the vagus system. For a long time everyone was puzzled to explain this remarkable fact that Nature provides the heart, the stomach and other important organs with two completely separate sets of nerves following different paths."

"Jolting The Nerves to Help Cure Cancer"
New York American, April 24, 1938.

Thots connected with these quotations are as vague as is vagus nerve with which one is concerned. One set is connected "WITH consciousness", other "equally UNCONNECTED with consciousness or will." Chiropractic would explain this on the simple postulate of Innate SUPER-consciousness and Educated consciousness, each connected with ITS section of total body. When each is placed in its proper and correct sphere, each doing its function in its part, all is clear and no complexity of understanding or explanation exists.

"So long as the CONSCIOUS PART OF THE BRAIN IS SERENE and normal, the messages it sends to the LOWER, UNCONSCIOUS BRAIN ARE USEFUL OR AT LEAST HARMLESS. But if WRONG MESSAGES start coming downstairs to the lower brain, that organ itself may get confused, send wrong orders farther down the line to the stomach and other organs, DIS-ORGANIZE THE LIVING CELLS and CAUSE the ulcers or the cancers which experts HAVE TRACED TO MENTAL INFLUENCES. ALL of them start DOING THE WRONG THINGS, CAUSING HAVOC, until a STERN CORRECTIVE ORDER is given."

"Jolting the Nerves to Help Cure Cancer"
New York American, April 24, 1938.

Let us again restate and correct the concept: "So long as THE CONSCIOUS (Educated) part of brain is serene and normal (non-cancerous) the messages (of health) it sends to the lower, unconscious brain (Innate) are useful or at least harmless." Let us restate this in the Chiropractic concept: So long as Innate brain flows an uninterrupted current from Innate brain TO Educated brain, Educated brain will think healthy thots, after which Educated

body will perform normal and healthy functions. So long as Innate brain flows an uninterrupted current from Innate brain TO Innate body, Innate body will perform normal and healthy functions and no cancer CAN exist.

HOW can Innate ALWAYS HEALTHY brain send "wrong messages" downstairs? How can that which is THE SOURCE OF HEALTH send cancerous "wrong messages"? How can Innate brain which is source of health send cancerous "wrong messages" downstairs, and "downstairs" "itself may get confused" and "send wrong orders FURTHER down the line"? Can it be that we have reached that degree of confusion that we can assert that "MENTAL influences" "CAUSE" ulcers or cancers?

"As more is learned about the detailed duties and actions of the TWO OPPOSING NERVOUS SYSTEMS and about just HOW TO TREAT THE NERVES OR GANGLIA in order TO CONTROL these actions, medical science promises to have a new and powerful weapon for the treatment not only of internal cancer, but OF ALL DISEASES OF THE INTERNAL ORGANS WHICH ARE PARTLY UNDER CONTROL OF THE UNCONSCIOUS BRAIN through THE LIVING WIRES CALLED NERVES."

"Jolting the Nerves to Help Cure Cancer"
New York American, April 24, 1938.

IF all above be true, what to do? Give "a stern corrective order", "jolt the nerves", "to control", "treat the nerves or ganglia," and thus we have "a new and powerful weapon for the treatment of not only internal cancer, BUT OF ALL DISEASES OF THE INTERNAL ORGANS." So, medicine propounds the philosophy of Christian Science, IF this newspaper report be true. And how can this be done if they "are PARTLY under control"? What about part that is NOT "under control"?

If there is NO electricity in or following thru wires, there'll be none in or flowing thru globe; therefore, NO LIGHT. Praying, no matter who does it or how it is done, will not put it there!

If there IS electricity in or flowing thru wires; there'll be electricity in or flowing thru globe; therefore, THERE WILL BE LIGHT! Praying, no matter who does it or how it is done, would be unnecessary, except as an escape valve to give vent to an educated expression of educated satisfaction. If there IS electricity in or flowing thru wires, and there is no electricity in or flowing thru globe, and there is NO LIGHT, then OFF button needs an ON adjustment. In such instance, ADJUSTMENT is needed, not prayers. Adjustment is practical and necessary; prayers are theoretical and unnecessary.

If a man had been normal, healthy, running true to potential functional capacity, mind and matter would be normal. Man is

subject to concussions of forces which bring interferences to normal quantity transmission. As a result, he becomes unbalanced, mentally and physically, producing mental quirps and physical symptoms and pathologies. The path of least resistance is TO TREAT symptoms and pathologies, therefore he sets up religions TO TREAT his mind, and medicine TO TREAT his matter.

Multiplied Units

Multiply the unit cycle of energy and matter up to endless issues that constitute man, and you have living man. Find what can be wrong in one cycle unit and you have the beginning of every problem of death, dis-ease, and insanity. Multiply that unit by many cyclic units and you have every problem of death, dis-ease, and insanity in a man. Multiply a one man unit by all units and you have the problems of mankind and their solutions.

Quantity of One Abstract Predetermines Quality of Another Abstract

Quantity and quality of educated thot and function are pre-determined by quantity of Innate Intellectual nerve force supply that gets thru from Innate brain to Educated brain. Quantity and quality of function is pre-determined by quantity of nerve force supply that gets thru from Innate brain to its organic body. He can THINK, educationally, only quality of educated thot pre-determined by quantity of mental supply that flows from Innate to Educated brain to THINK with, to produce thot. When people are insane it is because reduction has gone beyond a below-par stable balancing factor with which he can stabilize thot, to a point where he can no longer THINK to hold stable that balance. In spite of this being well known, people THINK they can more or less dictate to and control absent quantity and thereby make it present. Margin between normal or balanced-par and abnormal or unbalanced below-par is the field in which he CANNOT think, but IS the field in which he understands its absence and therefore becomes despondent to THAT degree, or THINKS to reach by thinking a stimulation of that which remains. It is within this range that psychologists, psychoanalysts, and mental therapists practice. There is a border line where cases are sanely insane, or insanely sane, where recognition of neither fully exists. ABOVE that border, they THINK to control. ABOVE that border, there is a reasonable latitude and longitude in which the individual, by himself or with aid of others, can play with the character of his thots, for HOW he thinks is WHAT he thinks.

Examples of what can be done ABOVE that border: A sick per-

son gets up in the morning. He has a vertebral subluxation—that's why he IS sick. It has interfered with a certain quantity flow between par, therefore is sub-par. He is not mentally or physically all there. Feels loose on ends. He CAN do one of two things IF ABOVE that border line:

1st. He can begin to grouch, grunt, and groan, bellyache about everything, manifest what he actually feels, and thus make himself THINK he is worse than he is; and in MENTAL REALITY only he THINKS he is worse than he is. In fact, he is no worse than the pre-determining factor of quantity of nerve force absent to produce and reduce normal thinking values.

2nd. On reverse, when he gets up in morning, he can hop out of bed, bound to window, tap chest, breathe fresh air, hum and sing songs of joy which do surround him in environment, smile at beautiful day in which he lives, THINK all the world is good, wonderful, and all-powerful, and make himself THINK he is better than he is; and in MENTAL REALITY only he THINKS he is better than he is. In fact, he is no better than pre-determining factor of quantity of nerve force present to produce normal thinking values.

We can add rouge to cheeks and try to paint the lily, look and force ourselves TO THINK we are what we are not, but underneath, in reality, it isn't there. We can drink whiskey and force the pauper to THINK he is a millionaire, but underneath, in reality, HE is no more than HE IS. BELOW that border line it is impossible TO THINK real what is unreal, because vertebral subluxation predetermines occlusion, pressure, degree of interference; hence function of production of thot can be no more, no less than that sequence of events makes possible. He cannot THINK with energy not present to think with, any more than a person could move muscles with energy not there to move them with, merely because HE THOT he WANTED to move them. (See Illustration 1.)

All know there is a great untapped reservoir of intellectual power over and above us. All know that none ever completely tap its unlimited resources and possibilities. All know it conceived us, gestated us, gave us birth, runs us after birth; it regulates planets and seasons, balances sexes, etc. All know it comes to us, passes thru us, and regulates our thots and functions. All know that if we COULD get more, we would think more, act more, be more. Why is IT unlimited and why are WE limited? Why do we grope for, seek, ask for, and pray for MORE of it, and DO secure more within certain limits and DO NOT secure more outside certain

other limits? Vertebral subluxation between IT and US is the answer. Vertebral adjustment opens channel between IT and US and makes more of IT possible IN US. Meanwhile, so long as vertebral subluxation DOES exist and is NOT adjusted, then what can mortal man do to get more of IT in US? TO KNOW IT IS unlimited, and TO KNOW we ARE limited, gives us courage to know THERE IS MORE to be had! And down to border line we CAN reach up and secure MORE of that which we KNOW is ours for the taking. That intermediary courage factor is often enough to bolster weakness, knowing it will strengthen us. It is that to which many pray and receive because it is within their reach to get, receive, and use. TO KNOW there IS a source of more, is often enough to tide sick man over period of mental discouraged weakness sufficient to give him a false mental strength of security to guide him over the shallows of becoming worse in his MENTAL attitude towards life and living.

It is within the limited, narrow, and majority circumscribed field of between superior to the border line of below-par cases, that prayer, religion, psychologists, suggestive therapists throw weight of argument in being of value to man. They act as a safe intermediary between below-par man above border line to help him understand there is a par and aid him in seeking it. THEY do nothing man himself could not do. He is as capable as they of knowing what they do and seeing, reaching, and thinking strengths of those thots, directly, within that border line. Chiropractor is of value not only in that majority limited, narrow, and circumscribed field, but also goes deeper into unlimited, broad, and super-circumscribed depths of digging beneath that border line and restoring sanity to insane, complete thinking values to those unable to think, because he goes ALL THE WAY from par to ANY DEPTH BELOW par to absolute zero. He turns on current from border line TO par, and also turns on ALL current from below that border line to ANY degree BELOW that border line of cases. He makes normal quantity and quality of thinking a NATURAL INTERNAL activity, relieving it from being externally forced upon man by man, but restores from within their fullest capacity without artificial bolstering of thinking they must consciously or deliberately THINK normal values. Most everybody is somewhere short of being perfect, within field of border line of par cases, in more or less degree short of being in perfect tune with Infinite Law. A small percentage is closer to bottom of scale of objectively observed conditions of possessing little, if any, mental value; little, if any, physical function. In early days, Chiropractic and Chiropractors had to approach this field with minority

chronic mental and physical conditions, on lower rungs of ladder. We now reach up and consistently enter field of majority, those above border line—all strictly in accordance with and consistent to the Chiropractic principle and practice.

As far back as records go, human beings have organized themselves into groups to worship at the feet of the Great Unknown. It might have been nature worship; phallic worship; perhaps worship to Buddha, Mohammed, or Christ. Each group said and did those things in those ways which came best within their understanding. Today we think we know more and better how and which is right and wrong, than previous generations. Time brings forth new sects, creeds, or denominations, each with a new savior, each contending all others wrong, his alone right. They did not know; we do! Backing up to dark ages when little, if anything, was known, Law worked, building human races, running worlds, as efficiently then as now. People were born, lived, and died, no better or worse then than now. Nothing any organized group did then, or has said since, has changed any part or parcel of that law. People are born, live, and die today the same as then. That should be obvious to any person. It was not vital then, nor is it vital now, that we think as we did or do. It IS vital that LAW makes no difference in what MAN thinks.

What Is "Religion"?

"Religion" is vague and seldom defined, yet generally understood by all. We define it two ways:

1st. "Religion" is a single, simple understanding of an association of a universal and unital abstract law which has builded natural composite units thru which to express itself. It is everywhere where the naturally builded unit is, because it is within that unit.

2nd. To vast majority, religion is found only in written, printed, or expressed word of others, each to his own authority; is a dress parade found only in certain edifices subscribed for and erected to that specific purpose, where tribute is paid to sustain ordained and educated authorities; is gloriously robed; is outwardly supported by endless complexed manifestations; is found in certain periods of week and hours in that certain edifice, wherein parishioner humbles himself in prayer and supplication to his deity thru certain rituals and ceremonies without which he loses his soul; saving his soul by mumbling certain definite, fixed rotations of certain words which he memorizes and repeats without end, and in which the temple in which he or she lives is a vivid demonstration of violations of every precept in his every concept.

Would one contend there is ONE God for each of the races—white, black, red, yellow? Would one contend there is ONE God for each of the religions—Mohammedan, Hindu, Buddhist, Christian? Would one contend there is ONE God for each of the 256 American Christian sects, creeds, and denominations?

If God WERE a person, then one small person could contend he COULD talk to the BIG person; one lower could talk to one above. Would one contend there is one universal God for each and all babbling tongues of all peoples and tribes? If there are many Gods, how is each God to hear all differing prayers? If there is but one God above all, for all, over all, then how is ONE God to hear all confused variables that plea and supplicate simultaneously? Would ONE God have time to listen to all and answer all, all the time?

If God is a name educated mortals give to an abstract law, which has no human gender, then NO PERSON can talk TO law any more than he could to any abstract element artificially created by man for man. Peculiar, isn't it, where we arrive WHEN WE THINK logically and piece reason sequentially together?

In Spite of

Suppose religion were what we are told, viz., a God sitting in Heaven, on a throne, etc. Suppose God were a he person, a great big heroic man, with mind and function, brain and body of some sort, never definitely explained. Suppose God could listen to prayers, heed supplications, and endeavored to grant them. Now, come down to earth, consider feeble man of various races, creeds, colors—black and white, yellow and red; Mohammedan, Buddhist, Hindu, and Christian; African savages, island natives, Chinese, German, Italians, Russians, Japanese, and Americans—each with conflict of demands, asking that THEY ALONE be gratified; each asking for blessings for HIS cause to exclusion of all others. IF there BE a mind on high, what a conflict it must be in, to listen to and try to grant any percentage of these. In spite of, rather than because of any, the world and its evolution has carried on, is carrying on, for millions of years, but are they answered? If volume of prayer counted, almost every major religion other than Christianity is out-numbered, and they would come first. We pray for peace, so do they—and war goes on! Generations of bipeds and quadrupeds are born and kill; are born, live again, and kill again—yet generations continue to come and go the same now as in former centuries, all existing as proof that law disregards man and petty squabbles, in favor of continuation of law and its demands.

When we get straight-line thinking, we realize law is law and man seems to understand little of it, about it, or what it actually is.

Living man is abstract AND concrete. On abstract side, he represents Universal Intelligence as producer; Innate Intelligence as ITS product; Educated Intelligence as ITS by-product. In a composite living unit, Innate Intelligence becomes producer, Educated Intelligence its product, and function its by-product. On concrete or material side, flowing of Innate Intellectualized energy thru matter becomes producer, motion of matter is its product, and its issue—such as heat—becomes a by-product. Flow is ALWAYS from producer to product, from product to by-product. Flow is NEVER from by-product to product and/or from product to producer. It is by-product (such as Educated in abstract thot or heat in material) which attempts to and tries to reverse itself and hopes to advise, suggest, infer, or direct value and quantity and quality of producer to do more and be more than it is.

No animal other than man assumes to pray. Law, as producer, needs no encouragement, suggestion, advice, or expression of gratitude from product or by-product. Law works when, within its judgment alone, conditions warrant. Law works when demand exists and it is met with supply, creating supply to meet demand if path of transmission is free from interruptions so action can be performed.

We have no quarrel with prayer or those who pray. It can be construed as a personal affirmation of educated mental by-product to strengthen, justify, and/or encourage conclusions reached by the thinking by-product to further convince that thinking by-product that what it thinks is right and sound.

What Is Prayer?

Prayer, as understood in religion, when brot to analysis, is a request for favors desired or anticipated, or a giving of thanks for favors received. Law gives without requests OR thanks. It gives with same freedom to him who does or does not ask, does or does not think. Prayers do not help or hinder producer. Imagine Universal Intelligence listening to contradictory prayers of peoples of this earth, and then trying to grant them according to request. Bedlam wouldn't be the word!

Prayer is a mental escape—an out—for the masses, into fields unknown, with the hope that something tangible will happen from below upward, from above downward. Miracles are stated to have occurred because one prefers to believe that in some unknown way something known took place. Beliefs are anesthesia which teachers

offer pupils when each prefers to hide behind an explanation demanded, and no explanation is forthcoming.

Prayers, miracles, beliefs, come within realm of good luck, charms, chance, that in some way law of cause and effect can be circumvented and a short cut can be quickly brot about. All are repeated as screens to hide behind when no other known logical explanation, reliable and authenticated, which reason and logic can meet, is given to explain occurrences. When one knows law, its causes and effects, definite knowledge replaces all.

Sick people go to well known shrines. Majority come away as bad as they went. A very few come away well, cured—even to grave pathological conditions such as cancer, etc. Sick prayed to a physical symbol, behind which was an abstract reality. It was said that if they believe, they would be made whole. When they recovered, it was "a miracle". That a very few got well, is admitted. How? Did prayer do it? If so, how? Why did prayer work in some, whose faith was little? Why did prayer fail in some, whose faith was unlimited? Was it a miracle? Why did miracle hit some and miss others? Was it because of beliefs? Then why strike some and pass others by? Or, was there a law of cause and effect at work? Was it cause and effect delivering in some and not in others? If there is a logical, sane, reasonable explanation, what is it? **WHAT IS THAT LAW? WHAT ARE ITS CAUSES AND EFFECTS? HOW DOES IT WORK IN SOME AND ESCAPE OTHERS?**

Recently, many nations have been at war. Each prayed ITS way to SAME God, each asking, and saying that God is on HIS side. The UI pursues its constructive purpose, regardless.

Any thot, idea, request, appreciation, implied or expressed, is a prayer. To concentrate upon ANY subject, to logically sustain or prove untrue reality of subject thot upon, whether religious or otherwise, is a prayer. Thinking puts thot into action, thus making theory into stronger action, whether called a prayer or not, whether within an edifice or out in the great wide open spaces.

We have listened to preachers' sermons. They appear to get a "kick" out of thinking they ARE PREACHING a line of reasoning which THEY HOPE is helping mankind. All they say goes out of THEIR mind INTO mind of listener—and there it stops for want of a practical way to put preachment into practical use. Chiropractor DOES NOT PREACH a sermon. He PRACTICES a reality, permitting that which IS PREACHED about to work its salvation internally without interference. We have watched Chiropractors practicing a reality of a religion. They should get a "thrill" out of knowing they are PRACTICING a line of action which IN

REALITY is helping mankind. All they can do is to make it possible to open channels for natural expression of law.

We find no fault with prayer. If patient gets satisfaction out of praying, we would raise no objection. Neither would we insist that he DO pray before he CAN get well. Prayer neither helps nor hurts, hurries nor hinders his recovery. We do not oppose religion. We oppose churchianities builded into it by preachers, which have all but destroyed religion. We do not oppose Chiropractic. We oppose imponderable barnacles fastened on to it by "chiropractors", which tend to destroy Chiropractic. We are for religion, unrestricted, same as we are for Chiropractic in natural and true state. We are for ships and precious cargoes they carry, but we are opposed to millions of barnacles which empirically attach themselves, which oppose their rapidly reaching their destination, wherever that is.

Simplicity Supreme

There is little difference in singleness and simplicity of principle and practice of religion and/or Chiropractic.

As soon as man enters picture of a religion, he dilutes it with educated concepts of what it should be. In HIS educated opinion he is greater, more important, and his opinions should dominate, control, direct, and supervise all. He lessens importance of the greater; he stresses importance of the lesser. He tries to make the Master a servant, and servant a master. He dolls natural religion into an artificial show front, and dress parade with circus trappings, to impress natives. He dresses himself, builds edifices, conceives rituals, performs ceremonies, mumbles assemblages of words to nth degree; without which, in his opinion, religion doesn't exist.

Same is true with Chiropractic. Many Chiropractors entering Chiropractic dilute it with medical concepts of what Chiropractic should be. In HIS educated opinion HE is greater, more important, and his opinions should dominate, control, direct, and supervise all functions in bodies of sick. He lessens importance of Innate; he stresses importance of education. He tries to make Innate a servant, and his education master of the body. He thinks something material from outside is greater than something immaterial from inside. He thinks he knows diet better than Innate, so he prescribes one. He arbitrarily thinks he knows par quantities and qualities of energy flow, so he externally stimulates and inhibits, thinking he can force one to his bidding. He adds air, water, light, heat, diet, exercise, etc., to his approach to problems of sickness and cure into an artificial treatment of symptoms to impress natives. He dresses his office with diagnostic and treatment modali-

ties and adjuncts, mumbles assemblages of diagnostic opinions to nth degree, without which, in his opinion, Chiropractic cannot exist.

Any man whoever he may be, living a simple and single life, is a personification of natural religion. Any Chiropractor, whoever he may be, living simple and single Innate life, is a personification of Chiropractic. And when simply and singly compared, there is little difference between a Chiropractic religion and a religious Chiropractor.

Sense — — — Semi-Sense — — — Non-Sense

We often try to fathom depths of a lawyer, architect, engineer, or any other mind that splits itself two ways:

1st. Trained to scrutinize issues minutely and accurately, to get every fact exactly right, to secure all evidence based on facts, to ascertain information based on tested rulings of highest law tribunals of scientific reliability, before reaching conclusions.

2nd. When it comes to religious beliefs, he glosses over most fabulous fables, mystical tales, and glaring violations of inconsistent semblance of any accuracy, fact, evidence, or law; and follows them with religious fervency with only most superficial consideration, leaving all thinking for others to do for him. Six days a week he weighs carefully. One day a week he goes carelessly thru a ritual and ceremony that wouldn't stand ten minutes of his six-day-a-week legal, architectural, or mechanical mind.

No legal, architectural, or mechanical mind would depend on prayers to win his case in court; miracles to build a bridge; or beliefs to erect a twenty-four-story office building. Yet, the moment any of these step out of their office and into a church, they leave reason behind and accept beliefs. For a Chiropractor to follow same procedure, is to place himself in same precarious position.

One might think we oppose religion, prayers of all kind, and resent anybody believing what he pleases, as it pleases him. We do not! We question invasion of prayers as a substitute for a normal quantity flow of mental impulses; beliefs as substitutes for vertebral subluxations and adjustments; miracles as substitutes for elements of factual law data of cause and effect; and religions as substitutes for realities of known elements constituting the Chiropractic principle and practice.

There are people of great faith, with no knowledge; people of knowledge with no faith. Of the two, we would rather have knowledge without faith. If there is no knowledge, it is well many have

a boundless faith, believing in miracles and prayers. It gives them something to tie to, which gives mental exhilaration and buoyancy in the fear and joys of a future hell or heaven. What would people be like if all religion were removed from those who live because of it? Think of what this world COULD BE if people possessed knowledge of their dormant and inactive possibilities that could be set free and made to work within them.

Religion, like Chiropractic, is simple and single. But preachers, like Chiropractors, have almost multiplied and complexed it out of common acceptance and almost driven it into oblivion.

Religion is the acknowledgment of a Universal Intelligence over composite things which live; governs their coming and going, controls their functions; always has been, is, and will be greater than we educated beings. UI works in spite of us, not because of us. To admit such is sufficient. It needs none and brooks no interference from man. It works if channels of communication are free, open, and without interference.

Chiropractic is the acknowledgment of an Innate Intelligence residing in composite natural things which live; governs births and deaths, controls functions; always has been, is, and will be greater than our educated understanding of such. II works in spite of us, rather than because of educations. To admit such is sufficient. It needs none and brooks no interference from man. It works thru man if channels of communication are free and open and without interference.

Logic or Heresy?

These ideas, presented these ways, may be, can be, and possibly will be construed as religious heresy, even tho logical truths. What is heresy but a breaking away from past accepted paths to lead to a newer and better way of understanding our relationship in the great scheme of things human? New interpretations are always construed as heresy to the older order of religions, until they are firmly entrenched, fully adapted and adopted; then they become the order of the day, and the old falls by wayside.

To disbelieve WITHOUT reason is to be a destructive iconoclast. To disbelieve BECAUSE of reason is to find a better explanation. To one who thinks, WHAT he thinks, AS he thinks, it is not heresy. To another who does not follow a like process, it usually IS heresy because he does not understand same problem, its process, or its conclusions. If orthodoxy cannot stand searchlight of investigation, and must therefore be believed blindly, and heterodoxy can, then let one replace other. Such statements as herein

made are not popular, nor do they appeal to the mass. No new idea ever was or is, in its time and place.

Chiropractic, per se, is evolutionary and revolutionary to medicine. If its truths unfold a new and better concept of relationship between cause and effect, creator and created, and these clearly walk boldly into religious fields, then let responsibility fall where it of right belongs, viz., to religion for not having correctly interpreted true relation TO man THRU man and his health welfare.

This is not the fault of Chiropractic or D. D. Palmer who discovered this hitherto mysterious impractical relation of God to man, and man to God. Notwithstanding all religions go thru minor evolutions, fundamental behind all NEVER changes, is stable, true, and that is LAW itself. Only man's understanding of what man thinks, speaks, writes, and prints about man's views goes thru change.

Some readers may think this story closely allied to pantheistic religion; that we try to associate man's life and his health akin to that relationship. Even if we would, we could not do better than has been done before. We ARE the living expression of all sound religions, based on same fundamental, regardless of creed, sect, or denomination. LIFE IS LIVING RELIGION of ALL religions. We could not, even tho we wished, disassociate one from other.

All one can do is to attempt to take religions out of theory and impracticability and make them scientifically sound and practically applicable.

It is impossible to discuss any involved subject containing as many elements as this, without discussing ALL elements, AS they apply. From time to time, we have interjections by way of explanation as to WHY and HOW we introduce and use the matter under discussion. This is done to prevent misconception and to clarify understanding.

To Know Is Knowledge

Analysts who give this subject study will think they see a conflict in philosophy, facts, and application. We have advocated futility of prayer, uselessness of asking for more of something from a higher source. We have said that vertebral subluxation prevents it getting to them WITHOUT prayer; that it is useless and unnecessary to ask for something which could and would flow naturally, normally, and fully, were it not because of this physical obstruction between brain and body, mind and function. If there is water in tank, if hose is attached to faucet, if faucet is open so water CAN flow, it is not necessary to pray for water. If there is water in tank, if hose

is attached to faucet, if faucet is CLOSED so water CANNOT flow, praying for water would not help. We seemingly advocate that. Difference is: first, there is a futility of asking for aid from Innate for if you have earned it and channels are open Innate will provide it without asking for it. If you have not earned right to its aid, Innate will not give, no matter how much you ask. Second, there IS an advantage in asking yourself to develop quality of that which you CAN give yourself which you feel need of, when education knowingly asks education for that better quality but does not look to a source beyond itself for it.

In first instance, it is useless to go above and beyond what education has because it can't get thru. In second instance, it is useful to go to ourselves, within border territory of education, to improve upon that which we have received, be it great or little, thus giving better understanding of what one sees a necessity for. It is useless to ask to increase QUANTITY from source where quantity is, when that quantity cannot get thru. But is IS useful to improve QUALITY of quantity WE HAVE even tho we know that quantity be below normal.

Study of any problem, with its solution, is simple when we secure FACTS and consider its UNIT of construction.

Vertebrate man, or animal, and his unit of construction, is a brain cell, efferent nerve, tissue cell, afferent nerve circuit over which flows a normal quantity of Innate Intellectualized energy consistently and constantly flowing to complete its cycles as a result of which we have a normal quantity of energy in a normal quantity of matter, performing a normal quantity of action sufficient to meet demands of life, which is health, which is sanity of thot and sanity of function.

Wars Intensify

War, with its intensified and intentional high explosive concussions of forces, materially steps up this international every-day frequency of strains, twists, wrenches, and other intentional concussions of forces, frequency of vertebral subluxations, sufficiently high to produce a much lower human race of mental and physical deficients, which carries over to long periods after war is over. Shell shocks are, to a war-ridden people, what punch-drunk is to a boxer who is unable to take it in the ring.

There is an every-day frequency of strains, twists, wrenches, and other accidental concussions of forces, in civilian life, which produces every-day frequency of vertebral subluxations, sufficiently high to produce a human race of mental and physical deficients.

This every-day frequency would not be serious, except to each individual, if they had been corrected on or about time of their production. But lack of correction in reduction means accumulation.

It is admitted that our army are picked men, so far as known objective and subjective symptoms and pathology are observable or detectable. More than likely, such can withstand greater concussions than average run of defects culled from possible army service. It must be admitted that concussions of forces which confront THESE men are also above and beyond ability of even picked men to withstand. Strains of World War II were greater than strains of World War I—and that produced many shell-shocked men.

This intensified and intentional frequency would not be so serious if it had been corrected at or about times of production. But lack of correction, in reduction, means accumulation in after-effects.

There was plenty of constructive work to be done by Chiropractors before World War II; there is more reconstructive work to be done since World War II—the demand will be much greater FROM NOW ON.

There is an inward sense of pride that comes to every Chiropractor who has remained true to his knowledge, becoming a pioneer and a convert to and a practitioner of a movement destined to evolutionize so much in human beings. There is an intensified exhilaration that comes to one who has so used his life in a constructive and reconstructive work, all of which was justified by work and works conscientiously rendered.

There is an internal, altho silent, even if externally unspoken and unheard demand within each individual for Chiropractic uplift of his mental and physical self to a higher and more efficient level.

There is an ever-increasing and swelling demand within human race for Chiropractic uplift of human race to a more normal health and spiritual return to Innate expression within each.

Yes, there IS a sphere of usefulness of ChiropracTIC and ChiropracTORS that have come to reconstruct this world to their rightful internal place in the great scheme of things.

There IS a universal call and cry for the principle and practice which will restore and reestablish insanity to sanity, dis-ease to health, abnormality to normality, de-Innate to Innate.

What principle other than Chiropractic meets these requirements? What practitioner other than the Chiropractor meets these possibilities?

The world cries for, seeks everywhere to find this unknown and unheard truth that accomplishes so much. None but a Chiropractor can understand the demand of the future, following World War II.

The Story of THE TREND OF THE TIMES

Thotful persons have been aware of a conflict in the health professions. In the past, medical branches have multiplied complexities until that profession is breaking under stress of any one man knowing more than a bit of a human being, sick or alive. He studies effects which have multiplied and complexed into astronomical proportions. He gathers symptoms, pathologies, objective and subjective; assembles, reassembles, classifies, tabulates, and diagnoses them, hoping to arrive at a clear understanding of what ails sick man. This is followed by a multiplicity of concoctions, vaccines, antibodies, prescriptions, pills, potions, until the field is endless.

Every practitioner of medicine knows he is in a circle maze, not knowing where to start, stop, or when he will arrive anywhere.

While all this was piling up, the Chiropractic movement has swung to the other end of the pendulum—simplicity—seeking a *specific* cause, *specific* correction, *specific* dis-ease. Today we have a definite knowledge of *one* vertebral subluxation as THE cause of all dis-ease; *one* definite source of cure within body of patient; for *one* definite dis-ease regardless of combination, name, location, organ, or condition involved.

Medical men have realized Chiropractic adjustment is accomplishing what they want to do. Our method of approach has caused them to stop, look, and listen. Today, they seek what we have.

At the 1950 convention of Chiropractic Society of Iowa (Des Moines), Dr. Wm. Heath Quigley gave a very thot-provoking talk on this question. His talk was given ad lib. Immediately after, we asked him to write it carefully and fully, that it could be reprinted to show the trend of time of medical men *towards* Chiropractic to try to stem the tide of Chiropractors, thinking they had to be medical men to be of any value to the sick.

Dr. Quigley's talk follows. It is worth thotful study:

Evolution?

By W. Heath Quigley, D.C., Ph.C.

"For several weeks an idea has been annoying me. I have found myself occupied with this problem at odd moments during the day. Chance conversation and reading, as if by design, have focused more and more of my attention upon this matter. Finally the idea bothered me so much that last Friday night I decided to talk to you about it today. This is not a carefully prepared speech. I have only had time to organize main topics. It is not my intention to confuse the Program Committee. However, the only dermatology I shall mention is

to refer to the serious eruption which is beginning to break out upon the body of the Chiropractic profession.

"This outbreak is a dangerous and misleading doctrine which is being developed by a certain group within the Chiropractic profession. It is particularly dangerous because it sounds so reasonable. At first hearing, you will feel that to disagree with this doctrine is to fly insensibly into the very teeth of logic. This doctrine is just now being promulgated by certain members of our profession. It goes like this:

"'In order to survive, the Chiropractic philosophy must be abandoned. We must not be limited by the useless tenacles of a philosophy. We must be true men of science and follow wherever this science takes us. Chiropractic can never hope to achieve a position of dignity and respect until, like every other science, it undergoes evolution. We never can achieve position and authority until we abandon a restraining philosophy, because philosophy is cultism.'

"Now you will have to admit that it sounds reasonable. It sounds as if through evolution our troubles will be resolved. But I don't believe I have to tell you that what sounds reasonable does by no means of logic have to be reasonable. This argument is neither reasonable nor logical but it will inevitably lead to professional suicide.

"When we abandon the Chiropractic philosophy, Chiropractic will become a corpse. If you don't believe what I have said, I am going to ask you to consider the following histories:

"Albert Einstein began his contributions to physics dominated by a central theme which was in conflict with the then present accepted scientific law and precept. Albert Einstein had from the beginning a belief that there was a unitary structure to the universe. This belief was shaped by his philosophy. In his own words, 'It (his observation) induced in me a cosmic religious feeling; that is, a belief in the possibility of interpreting nature in terms of a mathematical system of great beauty and simplicity.' Every school boy in the country was taught the fundamentals of Newtonian Physics when astronomers and physicists knew there was something wrong somewhere, but had no way of explaining the errors that kept reappearing in their calculations. One excellent example was the eccentric behavior of the planet Mercury. Instead of revolving in its elliptical orbit with the regularity of other planets, Mercury deviates from its course each year by a slight but exasperating degree. However, under Einstein's Gravitational Law, the deviation is not only explained, but it could have been predicted.

"Through these years, Albert Einstein was led from one series of discoveries to another, not by what the limited knowledge of his calculations indicated, but because he had a belief, a central philosophy that the physical universe and its three major forces could be explained in a single formula. Classical physics proved it was impossible to express the action of electromagnetic force, the force of light and gravitational force in a unitary formula. Imagination and belief in a principle accomplished what classical science claimed was impossible.

"This is undoubtedly the greatest discovery of the age. I am in no position to evaluate it, but perhaps we have witnessed the greatest scientific achievement of all time. It could well be. But the point is—can Albert Einstein be accused of cultism, because he had a central theme; because he could not prove it until he proved it by this final great achievement? Those of the opposition will say, 'Yes, but he proved many other points on his way to this last discovery.' And I ask: 'What do you suppose we are doing? Have you read the

latest books published by The B. J. Palmer Chiropractic Clinic, on hematology and urology?' Dr. Sherman will tell you about this research. This work is not the vague testimonial of a patient with subjective symptoms, but is the irrefutable testimony of the test tube and the microscope.

"When the evidence is placed before you and you can see the undeniable proof that the body's defense mechanism is so sensitive to the presence of nerve interference and that it responds with an amazing rapidity to the release of the interference, you will be hard to convince that you are a member of a cult. Perhaps we should have made these investigations earlier, but we have been so busy learning how to accomplish a Chiropractic objective, we haven't had time to make the surveys. Some day when you are in Davenport, visit the statistical division of the Clinic. You will see comptometer machines for statistical analysis; you will see men and women bent over microscopes; you will see file cabinets reaching the ceiling; and if that is cultism, then I want to belong to a cult.

"Behind this new slogan there seems to be the clear intent that the scope of Chiropractic should be broadened. It should reach out and envelope obstetrics and gynecology, proctology and the various fields of specialization in medicine. It means to adopt the medical viewpoint and medical equipment; it means in due time to take the same path as the osteopaths; it means to relinquish the tenets and rights of Chiropractic—everything except the name.

"In one of the opposition's greatest strongholds, California, where their influence is greatest and the pattern can be most plainly seen, they are reaching out into every known field of medicine, including obstetrics, gynecology, and proctology. A Chiropractic periodical contains articles on fitting pessaries, proctology, and an association gives a course in and examination in proctology. This means, then, that their kind of evolution is giving up Chiropractic and retaining only the name Chiropractic.

"The process of evolution as it has occurred here on earth was one of chance following certain laws which we have called 'Natural Selection' and 'Survival of the Fittest.' This process has required millions of years and a single species has come about only through a slow process of natural selection over periods of hundreds of thousands of years. Now when man began to understand something about this process he began to experiment. Within a matter of a few years entirely new types of plants and animals were developed. The grapefruit you ate this morning was not a chance development of nature, but was created by artificial selection and breeding. Perhaps untold aeons of time would have passed before chance cross breeding could have produced it. Only last year a poultry raiser developed a wingless chicken and that would have required ages before it would have happened in nature. When Luther Burbank began his experiments with plants he had only a belief not then substantiated, but he developed the central theme of that belief into a success story.

"Now consider this point: What is it that those who wish you to give up Chiropractic philosophy want you to relinquish? Philosophy, according to the dictionary, is the science that investigates the facts and principles of reality. Chiropractic philosophy, then, is the science that investigates the facts and principle of reality that apply to Chiropractic. I don't think I am taking liberties with logic when I say, 'Would you ask a man to give up prayer because science has not agreed upon the nature of God?' Willy nilly search without a goal is totally profitless. At the rate we are investigating our art, science, and philosophy of Chiropractic, we will, within a short time, prove ourselves either colossal fools or benefactors of mankind. And thus far we have found nothing but warm encouragement from cold figures.

"While part of our profession is yelling 'down with cultism—there isn't such a thing as a unitarian philosophy of disease,' the medical profession is enthusiastically and excitedly writing that a unitarian principle may actually be the case.

"In the March issue of Scientific American, there is an article on Cortisone and ACTH. And within the body of that article there is contained a new principle to medicine. It is call the Iceberg Theory of disease. I quote from the article:

"The picture of disease which these recent developments suggest is that of an iceberg. Seven-eighths of an iceberg is submerged and so is the greater part of the process of disease. This invisible area represents the body's basic response to stress of all kinds. But just as certain parts of an iceberg protrude above the water, so certain specialized responses of the body become visible as manifestations of specific stresses. For example, the symptoms of tuberculosis are the manifestations of the injury inflicted by the tubercle bacilli. But underlying them is the general response of the body to damage, and it has just as great a significance as the special response to the bacilli. Without both, the special and the general response does not exist. Each disease is made up of this special pattern outcropping above the general response of the body. Cortisone melts the iceberg so that the symptoms fall below the surface. But if you stop administering the hormones, the iceberg freezes again and the tuberculous fever returns, the arthritic stiffness and pain reappear, the asthmatic wheezes and gasps recur, and all other symptoms become visible. THIS PHILOSOPHICAL POINT OF VIEW GREATLY ALTERS OUR CONCEPT OF DISEASE. It presents the picture of a basic pathological process at work which, when it amounts to a certain magnitude, is the disease. And this idea, I may add, is completely at variance with the older views of scientific medicine. It is at variance with the idea of compartmentalized disease which is the central dogma of modern medical practice. Medical men who recognize the revolutionary and shattering nature of these developments realize that a great adjustment in our thinking has to be made. Here is the pool of Bethesda."

"Please note carefully the nature of the terminology in that paragraph. Medicine is being called upon to REVOLUTIONIZE their thinking, we are being asked to EVOLUTIONIZE Chiropractic. I say with conviction that we are being asked to give up what medicine is being asked to accept. Quoting further:

"The idea that there exists a universal remedy which is sovereign over all disease has persisted through the centuries. The medieval search for the elixir of life has been succeeded in more recent times by the familiar examples of homeopathy, osteopathy, and CHIROPRACTIC, each with its one cause and its one cure. Scientific medicine has consistently frowned on all unitary theories of the healing art, but the demonstration of what hormones can do brings the whole subject under a new scrutiny."

"Consider for a moment what has happened to homeopathy, osteopathy, and Chiropractic. Homeopathy gave up its struggle and search and fell into the set prejudiced pattern of allopathic medicine. Osteopathy, so very close at one time to a basic truth, is losing its identity in the practice of allopathic medicine. Only Chiropractic stands alone and we are being urged to evolutionize out of existence.

"Now that Chiropractors believe in a basic philosophy to give direction and sense to their investigations, we have consistently admitted the presence of

specific microorganisms in disease, but have contended they are not the cause of disease. For this shocking statement and belief we have been ridiculed and insulted both by direct action and in print. Medical journalists develop a rabid lather when they launch an attack on this heretical belief and club the readers with statements to lead them to believe that we are a menace to the whole of civilization. But excitedly, like a small boy who discovers some new fact which his father tried to teach him many times before, naively believes that it is his own discovery, the investigators are now writing that when cortisone is injected, symptoms of disease like tuberculosis and pneumonia disappear even though large swarms of these pathogenic bacteria are found in the blood, and the body pays no attention to them. In my last check up with a certain Chiropractic group . . . only cultists could believe that.

"Words can be tricky and treacherous. Or words can be used for the benefit of the human race. They do not always tell us the intent or the truth. Someone might ask me what I thought of a third person. If I wished to be tactful or deceitful, I could say, 'He is very sincere.' This might satisfy the questioner and he would assume I was ascribing a desirable trait to that certain third person. What I might mean is that when he beat his wife, he was 'sincere' in the desire to beat her thoroughly. However, if I desire to make my intention clear, I can do so. If I wish to be cunning, crafty, or artful, I can imply that I am sincere and desirous of helping you. Because I say so, does not make it so. The statement, 'Chiropractors who hold to a Chiropractic philosophy are resisting evolution of the science and are cultists', needs careful and unimpassioned examination. The word evolution is defined as the process of unfolding or opening out what is contained or implied in something. In that sense, we are definitely experiencing evolution because we are unfolding and developing our philosophic concepts, we are using the central theme of our philosophy to give sense and direction to our investigations. But it would appear that this other element within our profession does not mean this at all.

"Our philosophy is nothing to be ashamed of; it is the thing we can be supremely proud of. Calling it cultism does not make it cultism. Calling Americanism 'dirty capitalism' does not make it so. Nor does it make totalitarian dictatorship any more desirable. If you agree with the substance of this argument, I am going to ask you to renew and recharge your interest in Chiropractic . . . not just for today's patient, but for the generations to come."

The Story of INDUCTION vs. DEDUCTION

Man is a thinking, reasoning, logical deducer of ideas. Man has tried to reason where he came from, why here, where going, when and how.

We quote from an editorial in THE MEDICAL BRIEF:

"With these characterizations of the laboratory, in the main we most cordially agree, nor would we be supposed to offer the least criticism either of Professor Harris' subject matter or of his way of presenting it. We do, however, desire to point out that the very attributes which he specifically commends (and which we commend, too) have each of them an equally specific and emphatic danger. The cultivation of the inductive method of imparting knowledge, if carried to excess, DESTROYS THE POWER OF IMAGINATION, WITHOUT WHICH ALL KNOWLEDGE IS BARREN AND USELESS AND VALUELESS. The cultivation of the powers of observation, to the exclusion of the faculties of logical analysis, leads to a slavish dependence upon and bondage to sheer facts, as though facts of themselves represented the truths. The rigid application of the laws of science to problems in hand, if pressed to extremes, shuts out of consideration the 'unknown' factor which enters into every problem of medicine. And the spirit of research and investigation, excellent as it is in its proper place, is a dangerous thing in small quantities, being just enough to disturb a practical mind and not enough to make a good investigator.

"The whole situation may be summed up in the comprehensive statement that the laboratory represents the inductive viewpoint of medicine. Now, the inductive method, in any department of knowledge and work, is a most useful and valuable phase, if one bears constantly in mind its limitations and dangers. BUT, INDUCTION HAS NEVER CREATED A SINGLE MOVE WORTH MENTIONING. It is not in the nature of induction to be creative. ALL CREATIVE MOVEMENTS HAVE BEEN DEDUCTIVE IN THEIR ORIGIN. The creators in science, big and little, have always been the men who, having marshalled and classified their facts, have said, 'These facts do not account for the situation—there is something beyond them to which they are mere contributors or from which they spring.' The inductive aspect of things is, after all, a barren aspect. INDUCTION IS THE END, MERELY A CHECK UPON DEDUCTION."

Induction or deduction expresses a conclusive state of mind by one individual upon a processive thot or action. Words are vehicles of thot; thot is the result of ideas. He who thinks, reasons; he who reasons logically, questions; he who questions, is dissatisfied; he who is dissatisfied, is either constructive or destructive; he who is dissatisfied optimistically, aims for construction; he who is dissatisfied pessimistically, is destructive in his logical line of thot.

Induction is a term used in electricity. It means to draw from the main path a portion by the process of induction. A great many electrical devices have an inductive switch which has for its purpose the withdrawal of current from its main track and side-track-

ing it. A penny is a penny, and five make a nickel; so the inductive electricity is always a fraction of the total. When induction becomes complete, main flow has been side-tracked and at the end of the main circuit there is no electricity because inductive switch has derailed it.

Conduction would mean to carry electricity from dynamo to its motor, or what other means were there to express electricity. Conduction would carry on main path to complete a circuit. Conduction is a legitimate electrical term. Induction is a counterfeit.

Deduction means to deduct, to take *from* a common source, as to deduce that a penny in one hundredth of a dollar.

To induct that is to reason from known to an unknown fact, for the purpose of gathering together all conditions which are recognized as facts. For instance, were we to melt two pieces of iron and add them together, we would be producing a process of induction, according to man's definition, on the common ground that both pieces of iron are a known fact. Correlating these two known facts is to establish a process of induction, one to the other.

Induction might be a process of construction upon premises known. A synonym for induction would be science, in all with which science hedges itself. It restricts itself to known limitations of practical things.

To THINK is to step beyond limitation of science. And as man must think before he can act, man is always outside the bounds of science. Induction is forming new relationships out of old materialities and corporealities. For instance, man is sick, man should be well, prescribing of drugs, use of surgery, is an old idea.

Induction is striving for something new. New combinations must be brought about by changing series of conditions already known under other means, other titles, other conditions; such as, bread is a known commodity formed by a certain combination. Should a person make a cake out of the same combination, process of that which made the cake out of materials for making bread, would be a process of induction of that. To induce that is to go thru a process of that. Consequently, an inductive processive that is reasoning upon premises generally known, having a universally accepted standard, generally accredited by scientific people. Hence it is accepted without dispute.

Inductive reasoners meet the approval of authorities, scientists, authors, men in finance, politically and professionally, because facts—the premise of that—are conceded, they agree, they do not dispute, everything is established; therefore, inductive reasoners hold together as in a mass. Mechanics, architects, physicians, den-

tists, etc., are inductive thinkers and workers. Process under which they work has an established premise.

A concrete example: Tuberculosis is observable by physician. Patient coughs, sputum arises. No one disputes patient has tuberculosis or exudated a pus. Sputum is placed under microscope, germ found. No one disputes germ because microscope proves its existence. Here are three known facts: tuberculosis, pus, germ. No one disputes FACT that tuberculosis and germs are together; that germs are found in tuberculous patient. Here comes inductive reasoning: because germs are found in pus, which pus came from patient, which patient had tuberculosis—therefore, germ CAUSED tuberculosis. Every one of established facts is known—patient, tuberculosis, cough, pus, germs. But conclusion is *inductive*—germ caused tuberculosis. He goes further. Because germ is present, it causes healthy tissue to become decayed; therefore, living upon that which he produces means multiplication of germs; hence more death, more germs. Germ multiplied means more disease; therefore, tuberculosis causes germ and germ causes tuberculosis—two being together they hasten death. Consequently, patient gets worse and eventually dies. Error of induction is where physician reaches conclusion by assuming one causes other, for there is no deductive logic to sustain his position.

Again, we have germs, poison; and these germs—because they are alive—must have a poison to kill them. Therefore, inductively, what poison is strong enough to kill the germ is the question. Something is inculcated; it is given via mouth to patient; goes to stomach. Assumption is that it works to lungs and that once poison reaches lungs it kills the germ; and once germ is killed patient is relieved of suffering (his induction there is usually correct)—when there is no further tuberculosis, physician has ably covered his mistake.

This form of inductive thought is failure; for, in spite of Christmas seals, tuberculosis campaign running rampant over the country, tuberculosis is on increase in United States—so his inductive thought, conclusive as it seems, is a failure in application.

Another example is indigestion. There is ferment, vomitus; chemical analysis thru which physician puts vomitus proves acid in excess. No one disputes facts; we concede patient has indigestion, there is a vomitus, vomitus chemically shows excess acid. Inductive thought says because acid is in excess, alkali should be taken to neutralize excess acid. "To use human alkali artificially compounded would mean, perhaps, not to get quite the proper elements," says the physician inductively, "so I go to another animal

to get alkali!" He goes to a strong sturdy bull, or some animal that is strong—a fighter—which has plenty of "nerve" from which extract is taken. That alkali is given per prescription to patient, goes to stomach. It has a known effect—neutralizes acid. Consequently, physician says, "By this process we cure indigestion."

We have conceded FACTS, and concede further fact that alkali when given to an acid will neutralize it. We concede patient felt bad, but we haven't granted that our patient IS CURED or is well permanently of his trouble. Should he desist from taking bull alkali, human acid would persist in being in excess. Consequently, we conclude this form of inductive reasoning is a failure.

Another patient has curvature—kyphosis. We know kyphosis is in spine; we know spine is distorted. Here are three FACTS—kyphosis, spine, distortion; but inductive reasoner says "This spine needs to be forcibly straightened. We will put on a straight-jacket, use screws, force spine day by day, week by week, into what is a normal spine."

Another patient has caries of spine. Physician says, "This means there is a fever in spine. Way to correct this is to put on a plaster and steel jacket, and gradually buckle and ankylose it into position."

Another case has necrosis. Physician uses clamps, tightens into position, because there is decomposition in vertebrae; thus braces them, thinking to spread them and permit crevices to fill with new osseous callus.

Another patient has had fracture for three months which has not healed or united. Incision is made thru flesh; bone is exposed; segments have holes drilled into them and ivory pegs placed into holes. Physician waits two weeks and bone fails to unite. He takes out pegs, "silver threads" them, and still bone fails to unite. He takes out silver wire, scrapes edges of bone, thinking perhaps two rough surfaces would unite better; and that fails. Again, inductive reasoner says: "Let us make a stair-shaped serration on these segments and put them together." In time, that fails.

Let us reason again. We haven't denied KNOWN FACTS of curvature of spine, distortion, or caries with its spine and fever; or necrosis in vertebrae, with decomposition; nor have we questioned fracture which failed to unite. These are FACTS disputed by no one. But we question advisability of methods used, because fact remains that with braces in curvature, caries, or necrosis, with all methods in the unhealed fracture, they produced failure.

Medicine, in every study and branch, is based on inductive thot.

By his induction, he says if body is sick give it something from outside. If fever exists, give something cooling from outside. If constipated, give something from outside to stimulate internal action of bowels. If diarrhetic, give something from outside to check, to deaden and paralyze action. This inductive process says to go outside of man for something to modify known facts wrong inside; and that system of thot is wrong if we judge from results of what his methods have failed to do.

Glance at surgery. Here is an inflamed appendix—that is a known fact; no one disputes or questions it. Surgeon says proper thing is not to take something from outside and give it to inside, but to take appendix from inside and give it to bottle. In cases of cancer of stomach, lupus of nose, cancer of this, that, or other thing, surgeon says: "Cut it out; take it away from body; give it to garbage pail." This inductive reasoning IN SURGERY is a counter reply to inductive reasoning in medicine—one puts kibosh on other; one is right, other must be wrong. Which is which?

Physicians say if bowels are constipated to inject water; water will move bowels; or take Carter's Little Liver Pills for they will "assist nature"—notwithstanding "nature" can build islands in a night, upheave a city in an hour, demolish countries in a few minutes, and—all powerful that it is—in man needs a little sugar-coated pill to assist her. So says induction.

Let us meditate on obstetrics. Inductive thot says there is money to be made some place besides waiting at bedside thirty-six hours, and a pair of forceps are used to force delivery of child, saying "If the body won't hurry, we make it."

Medicine has an effect upon a well body, therefore when given to a sick body it is bound to change it. If medicine makes a well man sick, it is liable to make a sick man worse—or better—we don't know which; but trying has been going on for centuries.

Surgery says an organ can be cut out and man can live; bowels do move after water has been injected, whereas they didn't move before; forceps will pull child from mother. In all of these known facts, there is no necessity for play upon imagination of any person in any capacity—patient, physician, surgeon, obstetrician, or assistants. They are cold-blooded, material, well-known facts. Imagination would be as necessary as a pipe organ to an orang-outang in Africa.

Study anatomy. It is a known quantity, putting into books things which have been cut with knives, laid open, photographed—and words to describe where they were found, their shape, form, size, position, etc. Surgery is the right hand of anatomy, for surgery cuts

anatomy. Pathology is what a man sees of anatomy gone wrong. It is before him; there is no dispute, no question. Tissue is red, inflamed; there is pus; it is hot; there is no dispute of known facts.

Only study in which there might be a question is physiology; and there is no room for serious dispute, for preface of Kirke's Physiology tells us:

"The study of physiology must go hand in hand with the study of anatomy. It is impossible to understand how the body or any part of the body acts unless we know accurately THE STRUCTURE of the organs under consideration. This is especially true for that portion of anatomy which is called MICROSCOPIC anatomy or histology. Indeed, SO CLOSE IS THE RELATIONSHIP BETWEEN MINUTE STRUCTURE AND FUNCTION that in this country it is usual for the teacher of physiology to be also the teacher of histology. Another branch of anatomy, namely embryology, or the process of growth from the ovum, falls also to some extent within the province of the physiologist. But PHYSIOLOGY not only IS INTIMATELY RELATED in this way TO ITS SISTER SCIENCE, ANATOMY, but the sciences of chemistry and physics must also be considered. Indeed, physiology has been sometimes defined as the application of the laws of chemistry and physics to life; THAT IS TO SAY, THE SAME LAWS THAT REGULATE THE BEHAVIOR OF THE MINERAL OR INORGANIC WORLD ARE ALSO TO BE FOUND OPERATING IN THE REGION OF ORGANIC BEINGS. If we wish for an example of this we may again go to the eye. The branch of physics called optics teaches us, among other things, the manner in which images of objects are produced by lenses. These same laws regulate the formation of the images of external objects upon the sensitive layer of the back of the eye by the series of lenses in the front of that organ. An example of the application of chemical laws to living processes is seen in digestion. The food contains certain chemical substances which are acted on in a chemical way by the various digestive juices in order to render them of service to the organism. THE QUESTION ARISES, HOWEVER, IS THERE ANYTHING ELSE? ARE THERE ANY OTHER LAWS THAN THOSE OF PHYSICS AND CHEMISTRY TO BE RECKONED WITH? IS THERE, FOR INSTANCE, SUCH A THING AS 'VITAL FORCE'? IT MAY BE FRANKLY ADMITTED THAT PHYSIOLOGISTS AT PRESENT ARE NOT ABLE TO EXPLAIN ALL VITAL PHENOMENA BY THE LAWS OF THE PHYSICAL WORLD; BUT AS KNOWLEDGE INCREASES IT IS MORE AND MORE ABUNDANTLY SHOWN THAT THE SUPPOSITION OF ANY SPECIAL OR VITAL FORCE IS UNNECESSARY; and it should be distinctly recognized that when in future pages it is necessary to allude to vital action, it is NOT BECAUSE WE BELIEVE in any SPECIFIC VITAL ENERGY, but merely because the phrase is a CONVENIENT one for expressing something WE DO NOT FULLY UNDERSTAND, something that cannot at present be brought into line with the physical and chemical forces that operate in the inorganic world **** The method of observation consists in accurately noting things as they occur in nature; in other words, the knowledge OF ANATOMY must be accurate before correct deductions as to function are possible. The instrument by which such correct observation can be made is, PAR EXCELLENCE, from the physiologist's standpoint, THE MICROSCOPE, and it is the intended use of the microscope and the knowledge of MINUTE ANATOMY resulting from that use which has formed one of the greatest stimuli to the successful progress of physiology during the last sixty years."

Physiology is right-hand of pathology, as surgery is right-hand of anatomy. Physiology is presumed to be study of function in anatomy and is as close to average study of function in anatomy as Paris Fashions are to Sitka, Alaska.

Materia medica and surgery in all branches are inductive methods of study. Inductive process is used in all conclusions, which means that "We will recognize only such facts as everybody concedes; we will concede only those things that are before us in concrete, tangible form; such as, a muscle is a muscle; muscle is eight inches long; liver has five lobes; it weighs five pounds; etc.—things which are FACTS which no one disputes. M.D.'s have gone inductively crazy.

We might be led to believe that bacteriology was something imaginative, therefore not inductive in application—yet microscope has seen bacteria, counted them; 144,000,000 can dance a quadrille on a pin point.

Biology is the study of life. Pick any medical text book on biology. There is *one* chapter of study of life. Biological books today, medically written by medical men, are anatomies, as also are their physiologies. Kirke's Physiology is 99 per cent anatomy. If there is any PHYSIOLOGY in Kirke's Physiology, it is what you read into it—not what you find there—because in the composition of physiologies and biologies inductive methods of observation, reasoning, and publishing are used; inductive product being before you.

Inductive work is empirical, as a cancer is a disease of pathology, which we do not dispute. There can be no dispute that symptomatology is study of symptoms; that cancer has symptoms; consequently, inductively they are concrete facts.

Medicine is five thousand years old. It has some of the noblest and worst minds of mankind. It has had endless opportunity and personalities to make it a success; yet in 1950, medicine is a failure. Medicine is based upon medical reasoning; medical reasoning is a failure because it is inductive in conclusions. Medicine is a failure not because it has had ignorant men, but because they have ignored imagination. They have been all these things and more; they have tried to legally force people, if they dared to think, to accept their methods. In spite of research, they are still a failure because original foundation is wrong—inductive system.

Medical inductive reasoning is a failure because it never added new elements unto itself. It confines itself to material man, and if sometimes something comes which is not material they will make it so.

Inductive that reminds me of working within a circle but never increasing its circumference.

We cannot say that medicine is a failure because it has not progressed; it has been most progressive—insofar as it exchanges red for blue, cuts off blue and exchanges for black, etc. It is a rolling progressive line of that headed nowhere in particular and reaching nowhere in general, but always staying within inductive process, and therein lies its danger.

Inductive reasoning is not confined to medicine, altho that is the field in which we are interested. Mass of people thruout the world are on that line. Politics, schools, sociological problems are existing today imbedded strongly in that belief.

All is induction, sidetracking from original source. Inductive reasoning is reasoning from one effect AS CAUSE TO another effect as cause of another effect. Effects cause effects. They treat effect for purpose of creating another effect. "If we cannot get rid of one disease, we will make another out of this one and get rid of first by producing a second, then try a specific (?) for it."

Ninety-nine per cent of employees of average institution are inductive workers. They work because there is an envelope coming at end of week. They have to eat and clothe themselves. There are a wife and children at home needing food and clothes. All is an inductive reason for working. They never inject anything imaginatively new into their lives or those they associate with. Consequently, they inject much that is old and nothing that is new into their business.

Those who practice therapeutics, who call themselves therapists, are inductive reasoners because intent of all therapies is to treat or cure disease, to in some way alleviate, ameliorate, or relieve disease by external stimulation or inhibition.

Science is the "how" and art is the act of doing. How to adjust a vertebra, and the art of doing it, are inductive. He who is only a scientist or artist is induction personified; he who comes only within the pale of being a scientist and an artist in Chiropractic is a failure, because that has been the cause of the failure of medicine.

To philosophize upon science or art is to get outside of inductism and inject imagination into how and act of doing—and it is this injection that makes for success.

Inductive reasoner always has fought, is today fighting, and will fight (inductively) against deductive reasoning. He won't fight deductively because he can't. We said tuberculosis, sputum, germs

are known facts. Inductive reasoner says they are known facts and viewpoint is they are scavengers, effects upon effects." Inductively, inductive reasoner argues (inductively) that because germs are there is proof they caused disease. "But," says deductive reasoner, "my he replies, "Germ is there, isn't it? Tuberculosis is there, isn't it? Well, then, GERM caused IT!" The two are miles apart, neither getting viewpoint of other because processes are antipodal.

Inductive reasoning is unreal; deductive is real. Inductive is tangible; deductive is intangible. Inductive is concrete; deductive is abstract. Inductive is what we deal with from a material standpoint; deductive is immaterial. One is corporeal, other spiritual; both are true—one in science, other in logic and reason. Both are possible—one in material fact, other in imaginative realism. One is egoism, other egotism. Assume any premise which does not come within line of being real, tangible, concrete, material, corporeal, possible, or egoistic, and he will tell you your premise is unreal, intangible, abstract, theoretical, spiritual, untrue, impossible, ambiguous, and egotistic.

Inductive reasoner holds fast to what he has. He holds fast to yesterday and today because he knows what history repeats, and today is something definite. He holds fast to idea that stomach is diseased because he has chemically analyzed contents of vomitus—therefore he knows. He never reasons beyond, because that is fact, all there is, all necessary to prove excess of acid "caused" indigestion. He never reasons or broadens into imagination. Inductive reasoner always has been, is, and will be stagnator to progression, all of which he cannot help because inductism is real to him. He says, "I am progressive! I aim to improve known facts in case. I take all facts known and reassemble them into something different," all of which we concede is possible but that has not broadened our concept of original premise.

Deductive reasoner comes back with argument that he wishes to inject new thot into old condition, because known facts prove to be a failure; but inductive reasoner won't permit that. He says, "You are going outside of the pale of things tangible and real in the case." We see his line of thot—to get outside is to invite iconoclasm, to be theoretical, a thing he cannot permit. Inconsistent as it seems, inductive reasoner concedes good that follows deductive application and after conceding, he desires it.

He goes to residence, home, factory, business place of the deducer because he wants possible good which deductive application has over inductive. He goes for it; is willing to receive; but wants it delivered **INDUCTIVELY**. Naturally, original deducer is best

man to get it from, so inductive buyer goes to best man. Gradually, slowly, stealthily, cunningly, inductive reasoner sees good results secured, sees deductive reasoners do things which inductively he could not do. He says premises are wrong (because he is inductive reasoner) even though deduction is getting results upon foundation of that deductive reasoning. Yet he says "Deliver to me inductively!" As well ask to deliver water in a sieve or air in an air-pocket.

Inductive reasoner goes to deductive school, deductive factory, deductive employer. They cannot harmonize—there are different arguments. In disgust, he says, "I will go to an inductive school, factory, employer, where things deductive will be taught inductively." Hence, inductive reasoner is satisfied again because he is back in his inductive circle which refuses to admit new elements except as they change character, color, and convenience to become inductive.

Inductive reasoner has always been the subluxation to deduction. He short-circuits the line, inducts current of deduction; asks for deduction, and when handed to him refuses to accept because it does not come within the pale of inductive confines he deductively seeks.

Anything automatic or built with automatic purpose, or intended to be automatic, is induction. Inductive reasoning continually makes excuses. Why? Inability to adaptively deliver goods. Still, they are willing to concede they are failures in medicine, surgery, obstetrics, etc., but they will not concede premises are wrong.

It is always, "Environment needs changing," which is another one of many inductive fallacious theories. We have no fight with medical men; we have only a dispute with premise upon which medicine is based.

Inductive reasoner's ideal is deductive reasoner's dream. That is why inductive moths fly around deductive reasoner's flame. Deductive reasoner knows his ideal is true, and truth is not modified by man, the devil, or his representatives—it remains permanent; and if deductive reasoner's work is TRUE, man cannot change it from time to time. Inductive reasoner is involutionist; he retraces steps, starts over, goes forward, back-slides, starts again, and again back-slides.

The dream of deductive reasoner appears! To deduce that and action of man, vegetables, is to work from known to unknown. He correlates cause and effect, concrete with abstract, material with immaterial, spiritual with corporeal, law with its function. Deduction is a process of construction, based upon known facts over

which there has been at no time a dispute, but using them in capacity as the handle is to a dipper, as guide posts on path, to show where we are going.

Deducer says effects have a common source from which they come. If we decipher this common source, enlarge horizon of observation, if we make total of that brighter, put more light into it, then we better understand that today we know thoroly; when in reality with a knowledge of cause we realize how little of facts we knew as inductive reasoner, when we thought we knew all there was to know.

To decipher common cause is to step into realm of unknown, and then is when and where we play imagination, when we do the thing our books say is to step into the unknown of which every problem of medicine has had its share.

Effects are simple to realize. To study cause—that great “I AM”—requires hypotheses, theories, and relationships, each step of which must be logical, consistent, and reasonable. Deduction is forming new relationships out of conditions always in existence but never known or taught. Deduction is striving for better understanding OF CAUSE, not caring whether or not there is any comprehension of effects, realizing if cause is known effects can be deduced.

Boy's foot is on the hose, water was going thru before boy put his foot on it; cause is boy's foot producing pressure on hose; effect can be deduced. Water is not coming out of nozzle. To inductively desire, one can study effects at nozzle, but deducer (at point of pressure) knows what you will find (at nozzle) whether or not you go to nozzle. Effect is determined by cause, but effect does not prove cause because knowledge of effects has been all that was considered necessary to know.

To deduce is to assume all knowable things are not known, that man is still in process of being made, that there is a producer of which he is a product. Product is known but little, therefore producer is known less. Man is in the crucible, being moulded, and he knows little of the moulder or the crucible. But he is willing to study, investigate, assume, hypothesize, theorize, approach knowledge, get permission to knock, and peek in.

To deduce is to assume all knowable is not known; hence that and action are performed in ignorance; the world can be better than it is, reasoning upon and establishing new imaginative premises not now within realm of that, by so doing daring to dispute “facts” presumed to be settled, placing new standard in place of old, giving origin to iconoclastic ideas which tear down to immediately rebuild comprehension of things mental and physical.

Inductive reasoner said, "We will play only upon things known to mass of people." Deducer says, "I will accept facts for granted, and will take them for granted because I know them to be facts the same as you; but whence came they?" Inductive reasoner says, "There you go again, off into flights of imagination, playing upon poetical thots." He is right—and so are we.

Deductive reasoners are outcasts. They stand alone. They do not meet approval of inductive authors, authorities, publishers, etc., who are in majority. They dare to play upon a part of the unknowable, desiring to make it known: "Stomach is a stomach; back is a back; what do we care about mental impulse?" Thus they stand comparatively alone.

You may ask from which class come progressive movers of the world—inductive or deductive reasoners? We answer: from the deductive class. Geniuses, poets, musicians are always and have been deductive reasoners.

Napoleon played upon imagination fighting every battle; Mozart played on imagination when he composed music; Bach did likewise; Edison played on imagination when he thot of bottling words of great men today for ten centuries hence. In instance of a sculptor, here is a block of marble four feet square, weighing ten tons. Sitting down alongside, with pipe in mouth, sending up clouds of smoke, sculptor's imagination runs riot. He sees beautiful girl at seashore with basket and shells. He begins with hammer and chisel, and in a short period his imagination becomes concrete—for here IS the girl.

Imagine artist, having before him a bare, blank bit of canvas, mixed colors, brushes. In his head is a brain. But brain cannot use brushes to carry color and put something tangible and recognizable on canvas. He must have a picture which is real (to him) and this he transforms onto cloth. Imagination? Without it nothing could or would come.

Here sits musician at keyboard of piano. Death of a dear one throbs the heart, renders mind unable to think of anything else. While musing with sorrow a melody of sadness plays havoc with mind, heart, and fingers; soul hums tune, fingers drum it on piano. It is repeated, written, set to words. Imagination? Without soul throbs, nothing of significance could have issued.

Here sits a philosopher. His mind wanders over face of world. He sees all races at all times. He looks beyond clothing, sees backbones, sublaxations, adjustments. He sees writhings of their bodies, anguish of their minds. He listens to plaintive tones of the mothers' loss of children, pain of the new-born is to him an

hourly cry. He observes with abated breath useless torturing of bodies by medicines and useless butchery. He sees the young grow old before their age, good die young, bad suffering for their crimes. He sees source, the inconsistencies of semi-source. He watches shortcomings of non-source. He learns cause, sees its possible adjustment to all; rectifications of it all—imagination?—quite so, without which no improvement could occur.

Those people who have to do with progress of worlds are deductive, they dream improvement; of better mankind; in politics; social problems, better poetry, etc.; they possess deeper feeling for mankind, and someone says that is not necessary. The world can continue waggling as an inductive product, but progress is the intent of life. To improve kind is our duty. Penitentiaries, judges, statutes exist; leave inductive reasoners alone and they will exist; there is an unknown principle that has never been touched in the sociological problems of today, which, if touched, the spring tapped, flow of possibilities which would come forth would be so great that all sociological problems must right-about-face and beat it.

With every profession, science or art, there is an unknown—medicine is no exception. He who elucidates for one profession, science or art, in part or in whole, is doing an endless service to mankind with all.

There was a time when steam was unknown in mechanics. Here is a big fireside, logs burning; there is no light in the room; on the rug lies a boy trying to read a book by light from the fire; there is a kettle hanging over the fire, heat from fire boils water, top of kettle is on, water boils, and pop! goes top of kettle; boy looks up, sees top off, puts it on again, goes on reading, and pop! goes top again; he hesitates, reflects, thinks, IMAGINES that there is a possible force in boiling water. Imaginative boy says, "There is power in expanded water." He thinks of an engine, the principle of steam. What it is doing you know—all because a boy deduced a principle by playing upon—what? Tuberculosis, sputum, germs—germs cause sputum, sputum causes tuberculosis? No. He played imagination, and imagination is today a deductive fact to the deductive reasoner. It is a deductive reality in mechanical world.

Perhaps he might have dreamed about boilers, machinery in motion, about boats, train engines, etc.

We know another man, who, understanding the dream of Watts said, "Utilize this principle making a boat go up stream." He builded a boiler, started fire, got steam, got power, conducted it to wheel, wheel turned, boat moved upstream in spite of jeers

and hoots of engineers. Fulton, at one time, probably lay before a fireside and drew his picture on paper, imagined he saw a boat going upstream propelled by wheel moved by steam power—and again deduction became a fact to inductive reasoner only after deducer forced it onto him.

Let us see the principle under Watts' and Fulton's work. Did they reason from known fact to known fact? They dreamed from cause to effect. Mentally they saw boilers and motion long before they WERE a fact.

We see a man with broad brimmed hat, long flowing flapping coat, knee breeches, buckled at knee, silk stockings, buckled sandals on feet, going into field with kite in thunder storm. He flies kite into clouds, where he sees a flash of lightning, strikes a metal key and sparks fly. He went home, discoverer of a hither-to unknown force. What possibilities did that man dream? We don't know! Franklin was an imaginative man; he was one of the great day-dreamers of the history of the world, he made himself one of our greatest diplomats. He possibly did dream up in those clouds is a reservoir of force so great that the world could be moved if it could be concentrated in some way. Possibilities he had to imagine upon were endless. Don't think he flew a kite because of idle curiosity; he had a reason; he might have dreamed of machinery to execute desires to utilize force; of a new mechanical world, all because of possibilities in clouds.

Coming to modern times. Here is another man, a rare sort of genius, hair upside down. He doesn't care about time; would as soon work thirty hours as three. Food doesn't interest him; his mind is on one thing. As he sits in his office, smoking a cigar, building dreams in smoke, he sees a car run on street without horses or mules; sees it going up hill; sees a ball of glass and a big light in it. He probably sees some day we shall bottle voices of great men; probably a stationary engine running by an unknown force going through a copper wire; sees movies and hears them speak simultaneously; and there this man imagines impossible into possibilities. He proceeds to make it a reality. He dreams before he awakens. He puts it into effect.

None of these men reasoned from tuberculosis, sputum, germs, germs cause sputum, sputum causes tuberculosis, from effect to effect. Franklin and Edison reasoned from great unknown cause to tangible effects they could make out of it. They worked for that effect, they got that effect, and those effects are today realities. Mentally, they saw all they produced, and because of wierd imaginations the world has been moved forward in the past hundred years.

What about Libby's erratic trip around the world in ninety days? Since it has been done in 45 hours. What about Jules Vernes Twenty Thousand Leagues Under the Sea? Haven't we submarines? Examples are endless which more than prove induction creates progress, that deduction is the source of progression.

Assuming here is a swill barrel with garbage; supposing rats are found in barrel—did rats cause swill? Supposing there is dirt under finger nails; take dirt, put it under microscope, it is alive with a wriggling mass of animals. Did animalculum cause dirt? Take scrappings from between teeth, put it under a microscope, we find it alive with bugs. Did bugs cause dirt? Here is refuse from lungs—we call it pus or sputa—and we find the microbe. Did microbe cause dirt? No more than rat caused swill in barrel. He was there for a purpose and the more there the better off mankind was. Inductive reasoner says it causes disease; deductive reasoner says it keeps alleyways of lungs open cleaning refuse, a janitor to diseased organ.

We see fungus growing on tree. Did tree cause fungus? Did fungus cause tree? Why are they together? If tree was healthy, we never found fungus; if tree was sickly, there was fungus.

M.D. said there were worms in stomach of child; doctor said worms caused sickness. We found other children sick in stomach but didn't have worms. Worms did not cause sickness. What made sickness in one that didn't have worms, if it took worms in other child to make sickness? Deductively, you won't find germs in a healthy lung, you won't find tapeworms in a healthy digestive tract; they are there only when sick. Worms are there for same purpose rat is in swill barrel. Inductive reasoner says, "We concede your argument is good, but that does not deny fact that germ did not cause disease," and so begins his circle again. Deductive reasoner goes further and says: if germ is a janitor to dirty hall and, if hall is dirty because it is diseased, what is the cause of sickness? This takes us back to imagination, back to the daydreams, that which inductive reasoner says we must taboo and keep away from. Deductive reasoner says there must be a cause, so certain and positive that there is no possible dispute or question; we must establish a cause. Deductive reasoning demands analysis, and all deduction is analytical in its process.

Tuberculosis was in the man, as were germs; germs were a foreign agency, man was the thing important. Man to be understood, must be analyzed, and when we understand man we will know why germs are there. In analyzing man, he was mental and physical, spiritual and coporeal, immaterial plus material.

"But," says inductive reasoner, "don't tarry upon this mental, spiritual and immaterial phase, that is in the realm of imagination. You are dwelling on an unknown, touch it lightly, step easy, and whisper it softly; but go strong, hard and heavy on things you know to be real. Take my advice, you had better let the other alone altogether."

Knowing man has both, one must be with other, that one has bearing in its workings upon other, that one has association or relationship in and through the other; because man had the mental in him, he is alive. 100% of materiality plus 100% of immateriality meant 100% live man; 100% of materiality plus 0% of immateriality means a dead man; and 100% of materiality plus 50% of immateriality means the man is 50% alive and 50% dead; and this we could not get away from. To reach conclusion we play our imagination and daydream, because that cannot be proven in science, art or by induction. It exists as a philosophical hypothesis, theory, assumption.

Disease was absence of spirit in matter. What, where and how was this association produced? Cut off a man's head, he is dead below that; cut out his brain he is also dead. There seemed relationship between brain and body; we assumed this force was made in brain, went down through nerves, out from intervertebral foramina to organs, viscera, tissues, etc. Nerves go from brain out through spine to lungs; if power flowed, lungs worked; if power did not flow, lungs could not work. As result of not working, they were paralyzed. With paralysis decomposition sets in, with decomposition there was pus, then germ came.

We presume that nerves, pinched, would be like a hose pinched; would interfere with flow of life that man had to have if he were to be alive. Could they be pinched and force hindered in flow? We assumed a subluxation could exist. We palpated, found it, reasoned that current could be cut off. As result of condition of pus formation, we reasoned decomposition would exist at end of nerve in lungs. This was tuberculosis by our inductive friends, and "Germs cause tuberculosis!" was their war cry.

Deductively, we saw not only tuberculosis, pneumonia, pleurisy, and other possible lung diseases imagination can conceive. We saw knowledge of cause, of different degrees of pressures upon different quantities of nerves expressing in different length of time. We saw propaganda from viewpoint OF CAUSE, and did it deductively.

We cannot prove inductively that current is cut off; according to art, we can now prove intervertebral foramen is smaller; it

exists. This is the play of imagination and is the daydream. The unknown must enter every problem.

Here is our inductive friend, "Swat, the fly!" "Purify the river water!" "Boil the water, cook the germ, because it is the cause!" "Your adjustment gets results, but if you cannot prove inductively that germ is cause, we will go where we can get it that way!"

This was assumption, subluxation was presumed to be found. We gave an adjustment of hypothetical subluxation. We reasoned that would release pressure upon nerves, would permit current to flow, would thereby cause alleyways of lungs to cleanse themselves and germ to disappear and individual get well. We have been adjusting subluxations—we do know that current does flow, that current cures lungs; we and patients know it deductively. They know they were sick, they came to us, we did something that made them well; they are assuming, as we assumed, that it is what we did, and the logical chain of conditions that follows what we did which made them what they are now.

This work, is because process was deductive, working from cause to effect, mentally. Deductive method, thru its steps, was a success, BECAUSE PATIENT GETS WELL. We NOW assume health can be restored to tuberculous patient; mentally we dream millions of lives saved and prolonged. Tuberculous patients dying can be saved, because deductively we reasoned from cause to effect, and if logical in one, it is logical in all, because its premise is the same.

We reasoned further that if this were true with tuberculosis, it would be true with indigestion? An individual with indigestion had a subluxation hindering flow of current, that being only change in our reasoning. Same process of correction will restore health-giving current. Our individual got well. Inductively, there is no proof; deductively, patient says he is well; deductively, we agree. Says inductive reasoner, "If you cannot PROVE in concrete tangible form that inductively your work is true, there is nothing to your theory; I will taboo it; I will go some place where they give me something that is in essential concrete."

In curvature, caries, necrosis, and fracture, deductive reasoner sees deductive process; he sees Innate Intelligence, Innate brain, efferent nerve, efferent current, subluxation, pressure, lack of current, effects, to adjust subluxation is to restore current which means rebuilt bone, united fracture. There need be no external force used; we let cause correct its effects by permitting it to do so; we give freedom to cause, and effects disappear, all of which conclusion must be deductive in EVERY case. Inductively, inductive

reasoner says, "patient will not get better, unless we use inductive method of screws, braces," etc.

It is true our basis, deductively, was conjectural, was a hypothesis, a theory, because education was an affected effect trying to deduce the how and why of an infinite cause thru products. But so long as application of hypothesis works to entire satisfaction of deducer and patient, what more is necessary? That is more than logical (?) induction does with failures.

Analysis is logical, logic is mental, mental is spiritual, spiritual is imagination. Some people are sick, others well. Why? To answer this is to philosophize.

Innate is the original deducer of all. She uses mechanical in every action personified, and that is the recoil. Thots, muscular contractions, erections, muscular movements, ejection of fecal matter are by jerks; it is a process of utilizing the recoil in thon's work. Therefore, we deduce what Innate deduces, and, to be consistent, we use the recoil in our work—as does Innate.

There are cycles as solution to questions, "Why do people get well when adjustment is given? Why do people get sick when subluxation is produced?" There is spinography, deductive proof of existence of subluxation. There is nerve-tracing, using it to connect cause with effect or effect with cause, not as a method of locating cause WITH EFFECT but location of cause with LOCATION of effect. Chiropractic orthopedy; study of CAUSE of deformities is not study of deformity. There are circulation, anti-reflex action, anti-sympathy, Intellectual Adaptation, expansion idea—there are incidents along the path to prove deductive premise in preference.

Chiropractic, then, is based on deduction; if the body is sick; if there is a minus or "excess" quantity of function, permitting life, Innate, to flow—working from cause to effect.

We make this statement because Innate is a constant, stable quantity, is equilibrium personified in man. "Nature" cannot be assisted by pills because nature is infinite, complete, true to ability. Natural delivery of children is better than forced, as pregnancy is a natural function and delivery must be natural also. Natural delivery is a consequence of natural flow of nature from place where nature is to where nature should be, which is not there now because of subluxation, but will be after adjustment. Thus, do we play upon the unknown, upon imagination. The hypothesis is tried, deductive proves true. Reasoning, premise, was from cause to effect, from unknown to known, and proven to be from what is now known to that which before was known only deductively.

These thots are deductive, because it is now known that healing, curing, rebuilding, constructive effect follow adjustment of a subluxation which may be several feet from effect, showing a continuity of matter through which a continuity of current flows.

These thots call for dreaming; considering unreal, intangible, unseen, to accomplish results desired. As you adjust, dream possibilities that lie *within you* to do your work; dream possibilities that lie *in patient* to get well.

Life is the counterpart of anatomy, and without one other could not be. Life is neither more nor less essential than anatomy, but one could not be without other; hence, both are necessary. Life is duplicated in anatomy, in plus or minus condition when pathology appears. Pathology is a condition where we have life and anatomy at cross-words, being a wrong expression of normal functions displayed in tissue, organ or cell. Inductive reasoner would say, for a pathological condition, go to surgeon, have it cut out or go to doctor and take medicine. Deduction would say, behind effect, behind plus or minus condition, which is pathological condition you inductively see and know exists, is cause; proper thing is to adjust cause, thereby restoring normal relationship between amount of life flowing thru continuity of matter to expression of pathological condition. Deductive reasoner is a Chiropractor, because Chiropractor knows that for every effect there is a cause, and that cause is an excess or minus quantity of current flowing thru nerves to tissue cell; he knows that by adjustment of subluxation current will flow and Innate will restore pathological condition to normality or healthy condition.

All deductions must, of their nature, be analytical. There is a brain, there are nerves, tissue cell; brain is the seat of life, and nerves carry seat of life to tissue cells which express it. It would be logical to conclude that brain cell had to do with generation of this force, nerve fibre had to do with its transmission and tissue cell had to do with its expression. As tissue cell is the ending of one fibre it is but the beginning of another, which fibre carries impressions toward brain; brain cells receive and interpret it. Deductively, there are currents of life circulating thru man. We have afferent and efferent immaterialistic viewpoint of man. Life exists in brain cell—creation; life is in nerve fibre—transmission; life is in tissue cell—expression of life. Every expression induces impression. When this is in fibre, it is conduction. When this impression reaches brain cell it is interpreted, and we get mental recognition of life, all of which calls again upon the imaginative, to realize, all of which never has, can or will be inductively proven.

Experimentation and vivisection are silent; anatomy has nothing to say on that subject; and physiology says it is unnecessary.

In study of adaptative functions, orthopedy, all life force is governed by principle, prefaced by rules; consequently, a broader viewpoint is made than to say it is unnecessary.

Every impulse that leaves a brain has stamped upon it a personality; it is sent to place for a purpose; there is an Innate behind reason for sending it; it has definite route over which it is going; when it reaches tissue cell there is a specific execution that follows. There is a direct formation, direct transmission and direct expression.

There is a direct brain cell to tissue cell connection, necessary because of analysis man has undergone. Inductively, it has not been denied, inductively it has not been disproven, inductively it can now be proven.

With this view we see him as an organized structure; so systematized he becomes a mechanical device of many parts, one working with another, each working with some other, working unitedly for a common viewpoint. It would be inductive to say each and every part, more or less, was separately ruled by an independent nerve center, variously distributed throughout man; this would make man a hit and miss proposition, propagated and walking as an accident, living as a circumstance, baffling winds, colds and heat as an automaton.

Man is not only organized but he is a thinking, acting creature, according to system and form laid down in constructive imagination. This is again reasoning from cause to effect; having effect outlined, planned and executed in mental imagination before it occurs in physical reality. The nature of effect itself analytically proves condition previously existing.

Chiropractic is based upon Chiropractic reasoning, and Chiropractic reasoning is analytical; it is deductive from first premise to last; and he who attempts to study Chiropractic inductively might as well play a pipe organ upon bottles in an African swamp. If he desires a medical form of Chiropractic, inductively he will get medicine—but no Chiropractic—for he who adjusts subluxations to release sympathy and reflex action is butting his head against a stone wall.

Analysis is deductive because it tends to be liberal, in viewpoint of cause first and effect last; if needs be, it draws cause out of its shell, into educated personality; it constantly adds elements, because Innate in last analysis is the great unknown to Educated—unknown because it possesses greater than we think. Therefore, we

draw from the unknown. Addition of new is what makes science, art, and philosophy grow.

All things work in cycles—even stellar bodies in the great beyond, as does our earth around sun, as does moon around earth, stars around their common center. Cycles are the foundation of existence; trees grow and die; trees reproduce, grow and die; it has been that way from the beginning, it will be that way to the end; it is the cycle we make. We live today and our children tomorrow eat us in another form.

Chiropractors are successes when thinking and understanding; because they reason deductively upon premises surrounding them. When we refer to Chiropractor, we refer to him who is a Chiropractor, not one who titles himself "Chiropractor," for titles are as naught. There are "chiropractors" who are failures because they are not Chiropractors; the fact of degree tacked to name does not make them in reality the thing itself. We would rather be a Chiropractor in that, without a degree, than to be the best physician or surgeon with ten post graduate degrees. We would rather have essence of that and use it, even though it be little, than to have titles and know nothing and be a "epizudaddler." Those who study Chiropractic, and do so deductively, are successes. There are those who think they act deductively when in reality they are inductive reasoners, and wonder why they fail. They pitted inductive reasoning against deductive, and deductive won.

They have compared mental and physical results, and inductive reasoner loses and is chucked by the wayside, because the world recognizes deductive and kicks into gravitation inductive reasoner. Inductive reasoner is a scourge to the world, he is not in demand.

Deduction, in last analysis, is assemblage of mind and matter, of life with its body, making possible the correlation of the two. He who assumes that it is unnecessary, as did Kirke, will be forever proclaiming failure. When deduction permeates mind, action, success is in pursuit of you. In such instance you will never destroy the temple that Innate made. Your aim will be to adjust according to law of deduction, which is to use principle that Innate uses, the most important of which is the mental and physical recoil.

Man cannot impart education to another; man can only give an outline for study; it is for you to accept and make it yours. It is use you make which is education.

Only now and then do you find one who deduced an idea worthy of being added to educated storehouse of knowledge, and majority of those will go by wayside as year after year passes, because mass

of inductive reasoners do not give it support—on the reverse, they block wheels if possible.

In front ranks of our movement, which has for its purpose a knowledge of cause and adjustment of that cause, stands the deductive phase of Chiropractic. We do not know how many murders, adulterations and other statutory crimes we prevent by adjusting in advance cause of what might, if left to exist, produce crime as an effect. We today modify sociological crimes in every person we adjust, and when Chiropractic becomes universal men will be normal. Having no subluxations man must think right, act right; paralysis, insanity, sociological crimes are things of the past. Normal men and women mean normal government; normal homes and business men are right, government must be. Subluxation is the root of all evil; man should learn to adjust it.

Many a genius smoulders because public opinion would be against them. We say genius smoulders because of lack of opportunity to bring ideas forward. Inductive reasoner blocks path, public opinion is against him, public action would be detrimental should he bring it out—and genius smoulders.

Even Beethoven was not permitted to play the piano. In spite of protest of his family, he sneaked into the garret at eleven at night and played; there was genius smouldering and parents inductively reasoning their child could not play. Amongst great deductive reasoners, whether right or wrong, are Darwin, Huxley, Spencer, Shakespeare, Socrates, Edison, Franklin, Watts, etc.; they reached conclusions deductively, dreamed dreams. Bach, Mozart and Beethoven were dreamers. They contained within themselves hard application of making materialistic their dream. They drew forth from innermost recesses those things which went to make the world's greatest deductions. It was imagination that played into thot, music, writings, marble.

The poet in summer—104 in the shade, with ice-cold drink by his side—writes poetry about dead of winter—draws on imagination. Some of the greatest poets are men who work antipodally, in summer their winter pieces and in winter their summer pieces. They could play best upon imagination when things were not before them. They are immortal because they dared to make real their imagination.

In induction, horizon is limited; in deduction, it is not limited. As, in tuberculosis, inductively your viewpoint is confined to tuberculosis, sputum, germs—the physician today does not get away from that viewpoint. The Chiropractor, deductively, has Innate, current flow, subluxation, cause, and he plays upon imagina-

tion; once he located cause he can imagine any condition at end of nerve leading from cause—it makes no difference whether pneumonia, pleurisy, tuberculosis, pulmonary phthisis, cause for all conditions, regardless of name, in one tissue, in one place, in one organ, will be in one place, and that only. He looks to that place only for cause, regardless of name, degree, combination, germs or not, prescription or operation. This principle of deduction—cause and effect—can be applied to birds, animals, fishes, fowls, vegetables—there is no end because it is universal.

Philosophy, in its nature, is deductive. We philosophize upon cause. Once, having philosophized we make application to man. You have this consolation—from the nebulousness of infinity reduce it to finite comprehension; hence, what exists on the other side must be judged by what you know infinity has done as you have seen it acted. In act of trying to evolve the fundamental we approach nearer to the great beyond, the Innate.

To understand product is to understand producer. To understand man is to know his Maker. Not being able to know all, it behooves us to know as much as we can. He who philosophizes and never applies it is a fool. No person will do this unhindered or unapplied, for premises he arrives at will make him apply it to man.

Deductive reasoner educates deductively against inductive methods; he is steeped in deductions that all induction is wrong. We know medicine is a failure because we deduce that from comparison that we make with deduction.

The deducer of thot and action gladly lets go of what he now possesses to gain a new thot and idea, to grow, live, be more happy, contented; to make others happy and healthy; those are his motives of existence. He grasped the intent of Innate, which is to best serve greatest number at least possible cost in least possible time with most consistent growth, thereby improving condition of all it comes in contact with.

Deductive reasoner sees no value in treating one effect with another, knowing cause; he sees no purpose in desecrating the temple of Innate by injecting "anti's", could she but work, do best job of removing a diseased appendix—by restoring co-ordination—could she have uninterrupted flow. If antitoxin is necessary, Innate will make it, if she can; if an anti-diphtheretic serum is needed, Innate will make it if given opportunity.

Some men are born analysts. They make "best" criminals when subluxated, and they make best and strongest men when no subluxations exist. Some men sit in an office and deduct every move inductive reasoner would think or do—those are business men. We

have a vivid example of that in Burns that tracked McNamaras. He trailed these men step by step over the United States, landing crime after crime they had committed. And so great and comprehensive were methods used he forced them to plead guilty. He deductively sat in his hotel, and told to a line what inductive McNamaras were doing and trailed them accordingly. He deductively forced guilt upon them by bringing man after man with whom those men associated—hotel men where they registered, men with whom they had done business,— and having them sit in the court room, saying not a word; two different men the next day, etc., and as the case proceeded, in selecting jury, there sat those men in the court room that had done business with McNamaras and McNamaras knew inductively the deduction this evidence would be brought against them, that they might as well plead guilty. Burns claims no credit for having run to earth these men; he says he used the analytical process of deduction.

Study Sherlock Holmes' stories of Sir A. Conan Doyle. Deduction lands the criminal. If deductive thots would rest there, all might be well, but same brain capable of deducting life principle also deduces all of man, his thots and action; consequently his train of thot plays havoc upon thots—but they are all viewpoints of the same subject, which is man.

We give Edison credit for being a deducer of things electrical; but Edison does not confine deductions there. Same principle that elucidates problems of electricity is deducing other thots, so that we have Edison working on cement houses, cement furniture, all made complete in a day. He does not study in his laboratory on electricity only; his brain is deductive, every thot that goes thru it is deduced. All thot or action shows direct connection between our superior and material bodies is a thot deductive in form.

We do not hear of deductive reasoning offering excuses for failures. It refers to successes, to sublaxations adjusted, to healths and smiles restored, because premise of deductive reasoning is right. It is the person who changes himself to meet environment, which is deductive reasoning. Physician says it is environment that causes disease; Chiropractor says it is CAUSE that changes environment. Deductive reasoner is an evolutionist, and by his evolution he produces revolution.

Chiropractic has been years going through the process. The P. S. C. is a deductive school; a school where deductive thot is predominant; it will remain such. Deductive thot is conclusive, all pervading, broad—providing we so make it. This school is

founded upon deductive philosophy. The cold-blooded materialist entering this school and not desiring to change his inductology to deductology would be a fish on land.

No successful institution has ever yet separated itself from a successful man, and its employee; it is when employee gets on greased plank that he goes to Davy Jones' Locker. Should an inductive reasoner arrive in this school and try to make deductive methods inverse to induction, he would be in hot water; should such a person enroll, it is but a question of time until friction that exists within himself between induction and deduction will sooner or later cause induction to evolve to deduction or he will slip the cog, and gravitate to where he gets his induction on deductive subjects.

The fault is in himself; it is not in environment, in school, faculty, student body; fault is in himself in the fight between inductive and deductive reasoning. Man is selfish; he never blames himself for wrongs he imagines—it is always the other fellow.

Man can grow when he deducts; when he inducts his viewpoint, he is holding the penny close to the eye and complains he cannot see the dollar a foot away. This is the only institution teaching Chiropractic that teaches deductive Chiropractic. We teach philosophy Chiropractically and deductively, because students get knowledge of cause; we teach science and art deductively. Students get physiology with cause injected. When they work upon the platform, we tell them to keep in mind—to imagine, dream, see what they do. All this is deductive. They get a symptomatology outline, which is inductive, with deductive life injected into it.

It might be well to read, in the December PHILISTINE, what Elbert Hubbard thinks of law.

"We are all entangled in the meshes of the law, and what curtails them in others. To a great degree we are ruled by laws observation than ourselves. That is, we are governed by the dead. The reform of the law is vital to all people; for we are all answerable to the law. In the past there have always been severe penalties imposed for questioning the justice of the laws, laws were supposed to be sacred things—inspired edicts. And any man who expressed a doubt as to the righteousness of certain laws was assumed to be the enemy of the State and was speedily dealt with.

"But progress springs from doubt, and until men are dissatisfied with the present order there is nothing better for them in the future.

"The degeneration of nations has always sprung from one reason; they regarded their government and religion as perfect. And so any man who questioned either the religion or the laws—and these things were always one—was quickly snuffed out. Society has killed and banished its best—the inventors, originators, the men of genius—and preserved the commonplace—that is, those without sufficient imagination to picture a better condition.

"And the argument is this: When you are satisfied with your art, your edu-

cation, your work, your religion, your government, you are dying at the top and had better telephone for the undertaker."

We might crawl in and get under "law," which is for you to decide; if you do, you will go the way all induction goes—side-tracked, derailed, and eventually meet failure same as this inductive premise has reached.

Inductive medical reasoning is thousands of years old; deductive Chiropractic reasoning fifty-five. Inductive reasoning has had ages to prepare, fortify, hedge itself against deduction; Chiropractic deduction of fifty-five years is not and could not reasonably be expected to be perfect, yet because deduction is not able—as yet—in every viewpoint, to prove thousands of years of prepared inductive reasoning wrong, then inductors attempt to tell us we do not know where we get on or off. Prescribing drugs is thousands of years old; giving of adjustments but fifty-five. When we consider this fact as a paramount issue in deduction of the world, certainly it is remarkable to think we have hypothesized and proven as much as we have.

Medicine is a failure—it is inductive; Chiropractic is a success—it is deductive.

The Story Of REASONS FOR OUR CONVICTIONS

An Advance Word to the Critic

REASONS FOR OUR CONVICTIONS is a study in objectives and motives. Objectives and motives shade and color what every man thinks, says, or does.

IF men have same objectives and motives in common, they are in unity.

IF men have differing objectives and motives, they will be in conflict.

To be in unity is to understand each the other. To be in conflict, is to not understand each the other.

This story is an analysis of objectives and motives of human beings of our profession.

IF objective be to develop self, motive is to develop Chiropractic from within without, objective is to improve greater efficiency in health service to sick, motive is to be true to truth in fact—THEN this analysis is worthy of sincere interpretation.

IF objective is to develop greed, motive is to play to pride of personal opinions of one's self, objective is to enlarge ego of one's egotism from without within, motive is to use sick as playthings upon which to prey, objective is to be good fellows—THEN this analysis is wasted effort even to read.

CAN objectives change?

WILL motives reverse?

SHOULD objectives become reconstructed?

What forms or changes objectives or motives? Is it reason, environment, prejudice, passion, emotion? Or, is there a "that something" that comes as a wee small voice, from in behind, which is awakened?

In the spring of 1863, Abraham Lincoln established Gen. George B. McClelland in charge of the Army of the Potomac. Duties were to protect Washington; to move on to Richmond and attack Lee.

As Commander-in-Chief of Armies of North, Lincoln instructed McClelland to "move on to Richmond and attack Lee." McClelland remained quiet.

Lincoln then wrote McClelland to "move on to Richmond and attack Lee." McClelland remained quiet.

Lincoln demanded an answer. McClelland replied, "I do not have enough men."

Lincoln: "How many more men do you need?" McClelland: "Another one hundred thousand men."

Lincoln: "MY GOD! WHERE CAN I GET ANOTHER ONE HUNDRED THOUSAND MEN?"

To understand what Lincoln meant, let us review the situation:

North and South had been at civil war three years. South had won many battles. North had lost many battles. North had lost many hundreds of thousands of men.

People of North called it "needless and useless slaughter." People of North were almost in open rebellion against this "needless and useless slaughter."

Congress was demanding a "compromise to settle this war." The Cabinet was practically in open revolt against its continuance.

Lincoln remained adamant. "There can be no compromise between right and wrong." Lincoln called for another draft of one hundred thousand men. Lincoln again issued orders to "move on to Richmond and attack Lee." McClelland remained quiet.

Lincoln went down to the Army of the Potomac's General Headquarters. McClelland was out on the battlefield. Lincoln left orders with the orderly to report to the General that he was waiting for him in a side room.

The orderly reported. McClelland told the orderly, "You tell Mr. Lincoln I am tired and am going upstairs to go to sleep."

Some friends sitting with Mr. Lincoln in side room said, "Why do you take these insults from your lieutenants when you could, with the scratch of a pen, remove him from office?"

Mr. Lincoln turned to his friends and said: "You don't understand! You DON'T understand! Why, I'd get down on my knees and lick that man's boots if he'd stop this war!"

In 1885, some of Lincoln's correspondence came to light and it revealed that McClelland was grooming himself to oppose Lincoln at the next Presidential election. McClelland KNEW the more men he could get out of the North, with the North feeling as it was, the more HE would be in favor and the more Lincoln would be put in disfavor. McClelland KNEW that the more men he could get in his army, and keep them inactive, the more absent votes it manufactured FOR HIM and the more it took away from Lincoln.

It is a question whether or not McClelland was a traitor to the cause of the North, that he might work out a scheme for personal aggrandizement.

Lincoln KNEW all this, yet kept him in charge of that Army, saying: "Show me a better general on the battlefield, WHEN HE GETS MOVING, and I'll remove him at once."

It took from 1863 to 1885—twenty-two years—to clear up this misunderstanding which people held against Lincoln.

Lincoln-Douglas debates were held in 1858. Contest was over the Senatorship from Illinois.

In first debate, Douglas asked nine questions of Lincoln to be answered at second debate. Six weeks intervened between first and second debate. During interim, Lincoln framed four questions for Douglas to answer at third debate.

Lincoln took these four questions to his personal and political advisors. All passed the first, third, and fourth, and advised against asking the second. Said they: "That second question is fraught with danger; it is dynamite. Douglas will answer that so-and-so, and if he does you cannot answer him. If he does, he will embarrass you. If he embarrasses you to where you cannot answer him, it will cost you enough votes to lose the Senatorship from Illinois."

Lincoln replied: "I have thought it over carefully. That second question IS fraught with danger. It IS dynamite. Douglas WILL answer it as you anticipate. If he answers it as you and I anticipate, I will NOT be able to answer him. This WILL embarrass me and it WILL cost me enough votes to lose the Senatorship from Illinois. But, gentlemen, I AM GOING TO ASK THAT SECOND QUESTION!"

He did—and it cost him the Senatorship. For two years Lincoln remained silent as to why he asked it.

Two years later, Mr. Lincoln was elected *President* of the United States. He then called in his personal and political advisors and said: "You will recall that second question in the debate which you advised me not to ask, which I insisted upon asking. I am now ready to tell you why I did. That question was so framed that I knew Douglas would answer it in such a way as to please VOTERS OF ILLINOIS, because Douglas was willing to pay ANY PRICE to become Senator. But in framing that answer TO PLEASE ILLINOIS VOTERS, HE DISPLEASED VOTERS OF OTHER THIRTY-THREE STATES who have NOW elected me president of the United States."

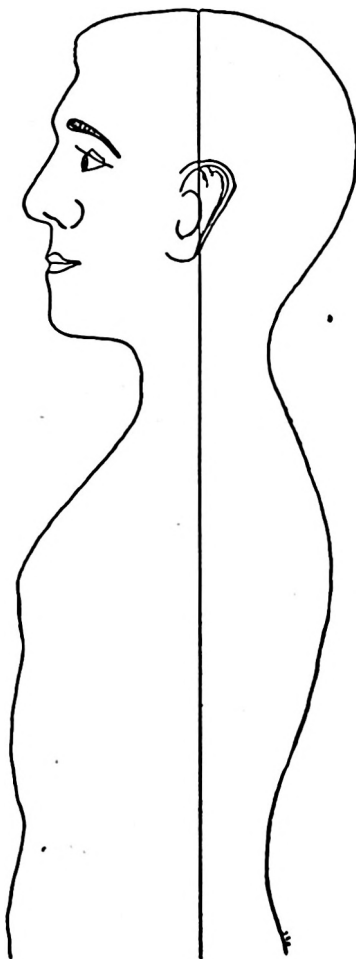
Moral: It sometimes pays to lose today, to win tomorrow!

Some Chiropractors who NOW read these two experiences out of the pages of history can make application to some things which have happened in Chiropractic history.

Two avenues of approach to sick: belly side; back side.

Belly side: medical side
symptomatology side
pathology side
effect side
diagnostic side
treatment side.

Belly Side
M.D. Side
Symptom Side
Diagnosis Side
Treatment Side
Cure Side



Back Side
D.C. Side
Analysis Side
Adjustment Side
Health Side

Cut A

Back side: Chiropractic side
cause side
analytical side
subluxation side
adjustment side.

Medical man gets objective and subjective symptomatology and pathology; makes internal, external, and eternal physical examinations; THEN diagnoses. He goes to OUTSIDE and prescribes INSIDE from OUTSIDE in FRONT SIDE.

Chiropractor needs an understanding of source, semi-source, and non-source; makes internal and external ANALYSIS. He neither gives from outside nor takes from inside, but makes an ADJUSTMENT from BACK SIDE.

Suppose you BEGIN on belly-side. You'll END on back-side.

Why? Because PREDETERMINING FACTOR IS IN BACK-SIDE.

QUANTITY of electricity PREDETERMINES QUALITY of light.

QUANTITY of mental impulses from back-side PREDETERMINES QUALITY of life on belly-side.

ABSENT QUANTITY from back-side PREDETERMINES PRESENT AND FUTURE QUALITY of dis-ease in belly-side.

That which PREDETERMINES QUALITY of symptomatology or pathology is that which PREDETERMINES QUANTITY of mental impulse flow.

QUANTITY FLOW, from spine outward, predetermines QUALITY of function on front side, because that which PREDETERMINES all conditions IN FRONT SIDE is to be found IN BACK SIDE.

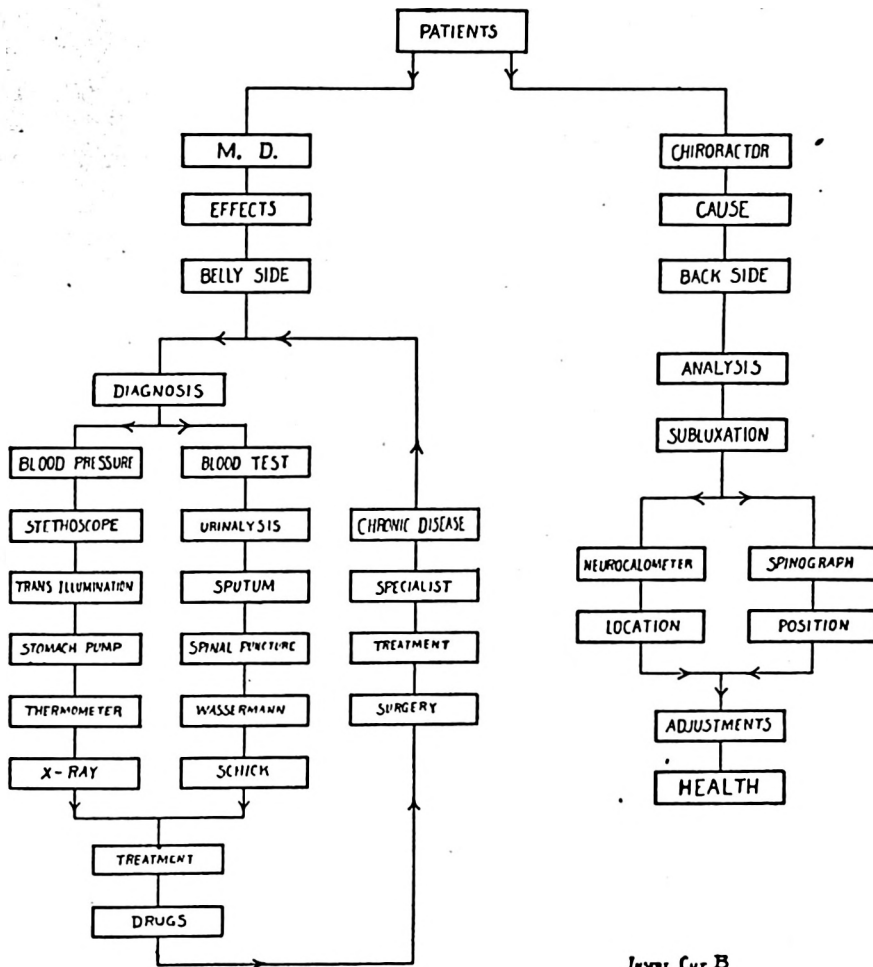
Study belly-side QUALITY of symptoms, pathology, and give it a diagnosis. You must still go back to back side to find the subluxation

- size of intervertebral foramen
 - location of subluxation
 - degree of subluxation
 - degree of pressure upon nerves
 - degree of changed size and shape
 - QUANTITY of reduced flow of mental impulses
 - degree of resistance to transmission,
- of all this which creates dis-ease.

Diagnose in ANY WAY, every way you please. Use any instrument or instruments you prefer. Suppose your belly-side diagnoses WERE RIGHT? Where would you go from there? What would you do? Why! Predetermining factor!

Diagnose in ANY WAY you please. Use any instrument or instruments you prefer. Suppose your belly-side diagnoses WERE WRONG? Where would you go from there? What would you do? Why? Predetermining factor!

Right or wrong, on QUALITY of belly-side, you must go to QUANTITY of back-side to get patients well.



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Why SHOULD YOU begin at spine? Because it predetermines QUANTITY, and QUANTITY predetermines QUALITY.

Subluxation, at spine, predetermines **QUANTITY FLOW**, which predetermines **QUALITY** at periphery.

Suppose you, a Chiropractor, do study front side; do affect to understand **QUALITY** of abnormal function; do guess at a diagnosis—THEN WHAT? Have to go to the **BACK SIDE**, don't you?

What is it that predetermines **QUALITY OF LIGHT** in globe? **QUANTITY OF ELECTRICITY** which comes to it from dynamo or battery! More **QUANTITY** of electricity, more **QUALITY** of light; less **QUANTITY** of electricity, less **QUALITY** of light. Or, in abnormal sense, more **QUANTITY** of electricity, less **QUALITY** (diagnosis) of darkness (dis-ease); less **QUANTITY** of electricity, more **QUALITY** (diagnosis) of darkness (dis-ease).

Given one hundred cases of heart trouble, **QUALITY DIAGNOSES** by M.D.'s were made right or wrong—no two alike. We take heart and heart diseases as an example—any other organ or diseases would do as well.

In 1895, when D. D. Palmer approached the backbone of man, it was like Livingstone and Stanley approaching shores of Africa—an unknown continent with impenetrable jungles—what was inside?

1. We traced **TENDER NERVES** between a certain place **IN BACK** and that organ **IN BELLY**.
2. We found taut fibres.
3. We found irregularities of alignment of vertebral processes.
4. We gave adjustments there and cases got well.

Four **PHYSICAL FACTS**.

Therefore, logical conclusion was four **HYPOTHETICAL** or **MENTAL FACTS**:

1. Location of subluxation,
2. producing pressure upon nerves between one and other,
3. interfering with transmission between one and other,
4. which was **LOCATION** of **CAUSE** of those one hundred different diseases in one hundred hearts between back side on one side, and belly on other.

We called this Heart Place, or "H.P." Other organs and other vertebral places, same way. Covering years of time, inferior **MERIC SYSTEM** was established.

Meric system was only basis of organized, systematized neurological distribution approach of all Chiropractors, for any disease,

to all organs. It was a child of OUR brain. We knew it as none other could. We knew its scope and limitations.

Meric system is anatomically sound (in exit of nerves to organs);
— is physiologically sound (in transmission of function between spine and organs);
— is pathologically sound (in locating disease at periphery of nerves);
— is Chiropractically unsound (for no INTERFERENCES are found where nerves or function emit.)

We followed that Meric system in 100 per cent of cases. We adjusted "H.P." for 100 per cent of heart diseases. With what result? We went there in MAJORITY of cases for CAUSE, and got only MINORITY of them well in EFFECT. That should have been obvious—but OBVIOUS is LAST THING we think, see, or do.

Because we proved a certain neurological rule true IN MINORITY OF CASES, we established it as a working principle and practice IN ALL cases.

We ALWAYS have gotten results. It always has been a question OF PERCENTAGES! D. D. Palmer—Harvey Lillard—deafness

— first patient WELL—100 per cent;
second patient FAILURE—50-50;
third patient FAILURE—65-35;
fourth patient WELL—50-50.

We began in 1895, with an average of three, four, or five per cent.

Years went by. New ideas were born; new methods established; new avenues opened up. New ideas and new methods WERE DEVELOPED. One by one, step by step, we developed.

More years went by. Palpation made more exacting the "hit-'em-all" method. Taut and tender fibres eliminated "hit-the-hills-and-valleys" system. Serous circulation made possible certain deductions in certain type of secretory and excretory cases. Cord pressures and cord tensions made our application more specific in those problem cases. Majors and minors gave us a constructive use, more specifically applied. Spinograph corrected errors in mental deduction and digital palpation, etc.

Criticism was directed to each in turn; that it was not yet completed when presented.

Chiropractic, itself, is not yet finished. Had we waited until it was, it would even now be in the womb of time, in the making, and millions of lives would have been lost. Nothing is finished.

History and how it was made is a prima facie fact which we cannot laugh off or cast to one side lightly, because of prejudice or denials.

GRADUALLY we climbed the scale of percentages. It ALWAYS has been a question OF PERCENTAGES!

Do we get ALL cases well? No longer can we kid ourselves as in olden days. A case of heart trouble—or it could as well be any other organ—comes to Chiropractor. He follows meric system—adjusts “H.P.” Weeks go by—case no better. “Maybe that was WRONG major!” He begins shifting from here to there, then to still another. Finally he quits case in disgust, or case quits him because of no results.

Heart is a FIXED organ; nerves are FIXED mediums; dis-ease in that heart is FIXED. If effect is FIXED, then so is cause—its subluxation.

Chiropractor starts on case with fixed condition, in fixed organ, SEEKING A FIXED CAUSE, and ends up by going out on a fishing expedition, seeking a FLOATING CAUSE, trying one place, then another, etc. Finally he quits case in disgust, or case quits him because of no results.

How many Chiropractors can say on what percentage of cases they made all back analyses, or belly diagnoses, they thot proper, then picked RIGHT MAJOR, FIRST TIME, and got case well WITHOUT FURTHER CHANGE?

In YOUR practice, you have known cases of headaches; palpated, found subluxation, gave adjustment, headache disappeared in a minute or two, and patient REMAINED well.

You can recall cases where you picked the major first time, got patient well. But question is: IN WHAT PERCENTAGE OF GROSS of your practice have you done that? Would percentage be high or low?

IF Chiropractic PRINCIPLE be correct, then every person suffering with an ill has a CERTAIN, DEFINITE, EXACT subluxation producing HIS ill.

This subluxation, pressure, and interference, wherever it is, is NOT a changing, fluctuating thing, switching about here or there, week to week.

If we WERE competent Chiropractors we should be able to find that CERTAIN, DEFINITE, EXACT subluxation without difficulty, with a scientific precision, and with fullest confidence.

IF Chiropractic PRACTICE be correct, then every person with an ill has a CERTAIN, DEFINITE, EXACT PLACE to give adjustment; a CERTAIN, DEFINITE, EXACT DIRECTION to give that adjustment to release pressure and restore transmission, which is NOT changing, fluctuating, switching about here or there, week to week.

We cannot have a FIXED effect, in FIXED organ—as, for instance, cancer in stomach—and have CAUSE floating around, running a wild loose course, fluctuating up and down at various or many places in spine, at various or many times.

IF we WERE competent Chiropractors, we would find CERTAIN, DEFINITE, EXACT location of pressure and direction of adjustment; stay with it until we dismissed our case well; saving much wasted effort, lost time, shaken confidence, and trying to build a business with a shattered prestige of our ability.

What was our reliable percentage? What WERE FACTS?

In 1918, a census of truth was asked for. We asked only those who WOULD give facts; who kept office records; who were not afraid of face facts; who used ONLY Chiropractic. (Surprising how many cowards are in our average group; how few keep any or accurate office records. Memory is a fickle and elusive thing. Opinion of any person who used two or more antipodal systems, where results were or were not attained, was of no value, for he could not determine which system failed or which succeeded. You cannot separate success or failure when it is divided by two or more systems.)

Four questions were asked:

1. What percentage of your cases GET WELL?
2. What percentage of your cases are DECIDEDLY IMPROVED?
3. What percentage of your cases are SLIGHTLY IMPROVED?
4. What percentage of your cases have you FAILED UPON?

National statistics: we succeeded on 35 per cent of gross; failed on 65 per cent of gross. Sometimes some Chiropractors were higher; others lower. Sometimes one Chiropractor would have a "run" that was higher or lower.

We were claiming 85 per cent. It was NOT true. (See further explanation under "Mistakes.")

Notwithstanding percentage is only 35 per cent, YOU JUSTIFIED YOUR PLACE IN GREAT SCHEME OF THINGS. Medi-

cine—5,000 years of organized study—claims 3 per cent get well; Osteopathy, 13 per cent; Christian Science 23 per cent; Chiropractic—35 years old—got 35 per cent of gross well!

WE faced this 35-65 percentage problem KNOWINGLY, UNDERSTANDINGLY. WE attacked it deliberately.

YOU faced this problem unknowingly, without understanding. YOU side-stepped it constantly.

WE analyzed the problem. YOU did not.

WE knew it nationally. YOU knew it as a few cases in YOUR office.

YOU thought IT WAS YOU. WE knew it WAS FAULT OF OUR INCOMPLETE APPLIED SYSTEM.

You knew cases were not getting well in your office. You did not want to keep taking money without giving value received. You were honest in purpose, sincere in intention, and used poor judgment in "solving" the problem.

YOU side-stepped this problem by backing up to MEDICAL principles and practices, further REDUCING your percentage,

- by getting over to belly side;
 - by reading QUALITY of symptoms and pathology;
 - by diagnosing and treating disease.
-

WE had NO SOLUTION to offer you CHIROPRACTICALLY.

We condemned you for going to medicine, and had nothing better to offer you in Chiropractic.

Patients came to doctor of back-side because doctors of belly-side had failed.

Chiropractors went to belly-side of patients because they failed on back-side.

They stayed ON THE BACK when THEY SUCCEEDED ON BACK.

If Chiropractic PRINCIPLE was correct, it was true in 100 per cent of cases.

If Chiropractic PRACTICE worked on 35 per cent, it SHOULD work on 65 per cent.

Were there subluxations in 35 per cent that got well? Yes!

Were there subluxations in 65 per cent on whom we failed? Yes!

Why did we succeed, then, on 35 per cent and fail on 65 per cent?

THIS WAS A CHIROPRACTIC PROBLEM AND COULD BE SOLVED ONLY BY CONTINUED STUDY ALONG CHIROPRACTIC LINES, by staying on back-side. It NEVER could be solved by going to belly-side and applying principles and practices of medicine.

If we FAIL ON SOME, does that prove PRINCIPLE correct?

If we SUCCEED ON SOME, does that prove PRACTICE correct?

If we FAIL ON SOME, does that prove PRINCIPLE wrong?

If we FAIL ON SOME, does that prove PRACTICE wrong?

That we got some well proves PRINCIPLE AND PRACTICE correct.

That we failed on some does not prove PRINCIPLE OR PRACTICE wrong.

If PRINCIPLE WERE WRONG, how could SOME get well, even tho we failed on others?

If PRACTICE WERE WRONG, how could SOME get well, even tho we failed on others?

Undeniable fact is we failed on SOME cases of same type, same condition, same organs as we DID succeed on in some others! WHY?

What about that 65 per cent on which we FAILED? Have THEY subluxations, pressures upon nerves, interferences with transmissions, dis-eases? Do THEY need adjustments, releasing pressures upon nerves, restoring transmissions, and health? Are THEY entitled to God-given right to get well? Must we let THEM remain sick for want of a better knowledge of where and how to apply this principle in practice?

BACK TO THE BACK!

We are "back to the back" on cases that get well by being "back to the back." We go to the belly on those cases in which we fail on the back. If we succeed on the back, we stay away from belly. If we fail on back, we go to belly, hoping to succeed on belly. But all we do on belly is stimulate or inhibit, FROM OUTSIDE, same as medical men have done FROM INSIDE. We then salve ourselves that we have "DONE SOMETHING."

If we succeeded in getting 35 per cent well by being BACK ON THE BACK with practice of a Chiropractic principle, properly applied, why not do the same on 65 per cent?

By staying BACK TO THE BACK, D. D. Palmer brot Chiropractic forth from obscurity to greatest health science in world, which you are privileged to pass on to the sick. But you FAIL ON THE BACK in 65 per cent, therefore conclude it isn't IN THE BACK but must be in belly.

Study back MORE and belly LESS, and you'll step up percentage beyond wildest dreams.

If PRINCIPLE of BACK TO THE BACK is right in 35 per cent, why is it wrong in 65 per cent? Or, is it wrong? Must OUR PRACTICE be construed 35 per cent ON THE BACK and 65 per cent ON BELLY? Can a profession stand divided in principles and practices? How long can a profession last, 35 per cent ADJUSTING CAUSES and 65 per cent TREATING EFFECTS?

Chiropractic can no more exist split 35-65 than could the United States continue to exist 50 per cent slave, 50 per cent free. Lincoln saw that—can you?

It was while this 65-35 CHIROPRACTIC problem was before us; this 65-35 Chiropractic problem WAS UNSOLVED; this 65-35 Chiropractic problem was making medical mixers out of Chiropractors, that one amongst us appeared and asked pertinent questions.

Question: "What is the rule of the 'hot box'?"

Answer: It was laid down in 1906, in Volume III. Mental impulses flowed down TO point of interference. Some got thru. SOME WERE SIDE-TRACKED THERE. (That some got thru was evidenced by fact that tissues were not dead. That some were side-tracked there, was evidenced by dis-ease at periphery).

Question: "Where do mental impulses GO that don't get thru and can't go back?"

Answer: Being energy, they create abnormal action at point of interference; generate extra heat, which is dissipated to surface at that point. This is an ACUTE subluxation, creating an ACUTE interference, generating an ACUTE hot-box. (In early days, we ran the back of our hands up and down spine, hunting for "hot-box". When we found HOTTEST spot, this was THE LOCATION of ACUTE subluxation. When PATIENT felt COLDEST spot, this was LOCATION of ACUTE subluxation, to him. And

that adjustment on Acute hot box adjusted ACUTE cause of ACUTE fever).

Question: "Suppose ACUTE subluxation runs on for years WITHOUT ADJUSTMENT—does subluxation still exist? Is there still a resistance there? Is there still existing a hot-box?"

Answer: Subluxation becomes CHRONIC. Resistance is CHRONIC. We now have a CHRONIC hot-box. (Difference between "acute" and "chronic" is degree of intensity. ACUTE hot-box can be felt by human hand. CHRONIC hot-box becomes so low it is outside of range of human sensitivity).

Question: "Then you cannot find, detect, or locate CHRONIC HOT-BOX with human hand?"

Answer: No.

Question: "Would it be of value if such could be found?"

Answer: Answer to this question lies sealed in that 65-35 per cent problem. If we KNEW the answer, we could say "No." If problem remained unsolved, then answer was, "I don't know." (Chiropractically, it is reasonable that if an ACUTE subluxation created an ACUTE disease; and, if unadjusted, would exist as a CHRONIC subluxation; therefore it would create a CHRONIC disease. To accurately locate CHRONIC subluxation, should give GREATER EFFICIENCY in locating CHRONIC CAUSE FOR CHRONIC DISEASE which is result of ACUTE CAUSE OF ACUTE DISEASE).

It is obvious that range of ACUTE subluxation is so great a clinical thermometer or human hand COULD detect it. Temperature of hot-box in an ACUTE subluxation WAS WITHIN range of human sensitivity.

If there were a range of temperature in CHRONIC subluxations what WAS that range?

After six months of research, this one amongst us found the minimum and maximum temperature range of CHRONIC subluxation was within one-hundredth of a degree centigrade.

Temperature of hot-box in CHRONIC subluxation WAS BEYOND range of human sensitivity. Could it be made to come within realm of A MECHANICAL sensitivity?

Principle is simple, by which this fact was ascertained and answered. It is not new to physics or students of physics.

Two wires: one IRON which absorbs heat slowly;
dissipates heat slowly;
retains heat a long time;
one COPPER which absorbs heat rapidly;
dissipates heat rapidly;
retains heat a short time.

Solder two together; put them in approximation of heat. Opposition of each to each generates a TEC—thermal electric current. No batteries.

Hook these two wires to a galvanometer, sensitive enough to measure it, and it will register AMOUNT OF TEC generated, by opposition of opposite metals, when heat incites them into opposition action.

This is a thermocouple. A COUPLE of wires, acted upon BY HEAT.

A PILE of wires hooked together is called a THERMOPILE. (We make no claims to being a scientist or physicist. We take man and reason him thru to a consistent working principle and practice, and solve his problems accordingly. If our terms are not those of scientist or physicist, it is because we are not one of his profession, make no claims to be, but express ourself in our own terms. We have followed language of the layman in explaining above to layman).

This principle is used to measure heat of stars fifty million miles from earth; also to measure heat of molten metal, five thousand degrees Fahrenheit.

It depends upon kind, length, number of wires in hook-up to reach either range.

This one amongst us now brot to us this mechanical device, incorporating this physics principle, telling us it was a MECHANICAL CHRONIC HOT-BOX HEAT-FINDER, and would locate chronic-hot-box subluxations.

What was it worth? We knew not. Would it work? We knew not. Would it solve our 65-35 problem? We knew not.

All we could do was try.

There isn't a week but what somebody from somewhere submits some solution of some of our problems. If that solution be based upon MEDICAL principles and practices, we dismiss it at once because our knowledge of legal decisions by Supreme Courts, in

civil cases, proves this their prior art right, upon which we have no right to trespass or steal. If solution is based upon use of some CHIROPRACTIC principle and practice, we ALWAYS weigh it carefully, thoroly, and sincerely.

We have been severely criticized for refusing to consider SOME ideas presented. NOW you know why. Basis upon which we can or cannot consider such has been predetermined by Supreme Courts.

We took this mechanical, chronic-hot-box heat-finder and went into retirement. We took 486 cases on which we had failed with use of every and all other methods. We began working.

At end of six months, we came out a physical and mental wreck. But we had solved the 65-35 per cent problem.

It PROVED our specific system to be correct in 35 per cent of cases we had been getting well.

It FOUND places of interference OTHER THAN INFERIOR MERIC SYSTEM in 65 per cent of cases.

It DID locate chronic hot-boxes. They never had been exactly located WITHOUT mechanical aid of this mechanical chronic-hot-box heat-finder. They could NOW be found WITH mechanical aid of this mechanical chronic-hot-box heat-finder.

We came out a physical and mental wreck.

Another progressive step in the Chiropractic problem had been solved. We eliminated theory on a vital question. We discarded guess-work on where THE subluxation was. We could now ascertain EXACT location of interference to mental impulse circulation. We could do this with a scientific instrument of precision which could not misrepresent what it found. We could now face scientific world, use a scientific principle, and prove to scientists that the Chiropractic principle and practice ARE scientific.

Our big problem was just ahead. Problem of the Chiropractor had yet to be faced.

How could we prove to him that above were true; that he could ascertain EXACT location of interference;

- a vertebra could be moved without being an adjustment;
- a vertebra could be moved without releasing interference;
- a vertebra could be moved and not restore transmission of impulses;
- frequently moving a vertebra increased pressure and decreased transmission;

— now there was a means by which he could check and prove which he had given.

That we underestimated the battle ahead, has been proved by what has occurred since.

WHERE did this mechanical chronic-hot-box heat-finder find interferences in 100 per cent of cases?

Back up to our 100 per cent of cases of heart trouble—and it holds equally good with any other organ of body.

A percentage was solved by SPECIFIC SYSTEM. This mechanical chronic-hot-box heat-finder proved that percentage sound.

1. SUPERFICIAL VISCERAL NERVOUS SYSTEM INTERFERENCE.

2. "CORD PRESSURES" accounted for largest percentage.

PRINCIPLE of "cord pressure" was not new. It was laid down in Volume III in 1906. Previous to advent of this mechanical chronic-hot-box heat-finder, about one-half of one per cent were attributable to that.

This mechanical chronic-hot-box heat-finder proved definitely when such occurred, where such existed, and in which cases it applied.

This solved about 50 per cent of the 65 per cent of problems to be due to "multiple interferences."

3. SPINAL NERVE PRESSURE is too well known to require explanation here.

4. "CORD TENSIONS" accounted for another percentage.

PRINCIPLE of "cord tensions" was not new. It was laid down in Volume III, in 1906.

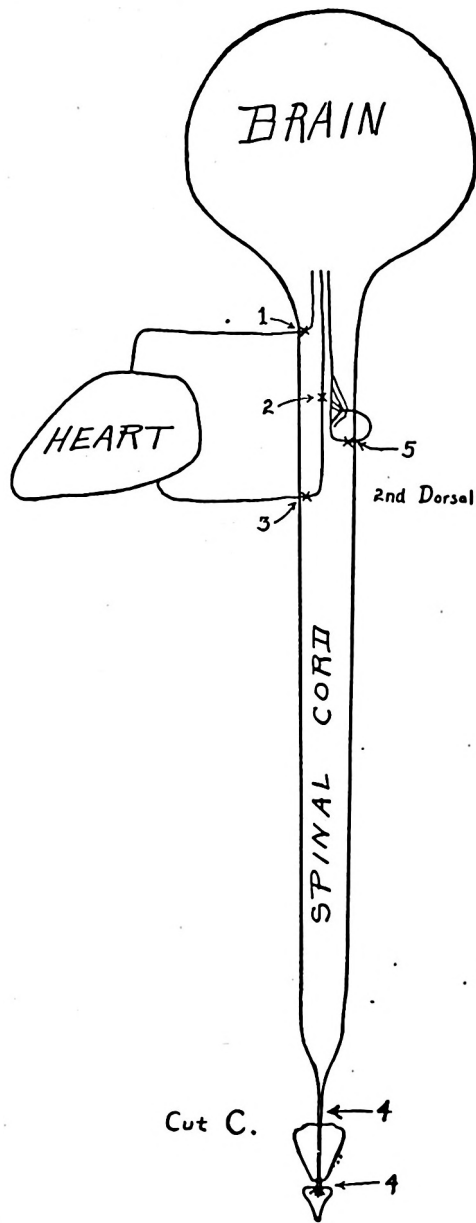
This mechanical chronic-hot-box heat-finder proved definitely when such occurred, where such existed, and in which cases it applied.

5. "INFLAMMATORY PRESSURES" accounted for another percentage.

PRINCIPLE of "inflammatory pressure" was not new. It was laid down in Volume V, in 1914.

Fibers came out from above, ran down lower and into spinal canal.

Spinal nerve pressures ABOVE created an inflammation BELOW, swelled meninges of cord, caused them to swell out, then in, and produced inflammatory interference ON CORD.



Spinal nerve pressure ABOVE created inflammatory pressure BELOW, hence dis-ease even below that.

This mechanical chronic-hot-box heat-finder definitely proved when such occurred, where such existed, and in which cases it applied.

There are two kinds and places of possible INTERFERENCE TO TRANSMISSION, at FIVE different places, with FIVE different constructions upon them, viz.:

1. At exits, laterally, as SUPERFICIAL VISCERAL NERVES leave occipito-atlantal-axial region.

2. At some place in vertebral column, UPON SPINAL CORD or some of its many fibres, as they pass down thru spinal canal and have their exits thru some lower intervertebral foramina, commonly known as "inflammatory cord pressures."

Following thru example of 100 per cent of heart troubles:

1. Nerve tracing still reveals tender nerve between second dorsal and heart.

2. Taut fibres will still be found at region of second dorsal.

3. Palpation will reveal misalignment irregularities at same place.

4. Spinograph will reveal misalignments there—BUT actual interference, because of pressures, WILL NOT BE FOUND there.

SOMEWHERE ELSE, above will be found the actual interferences.

We do not deny any of earlier principle or practice of Chiropractic. WE ADD TO a more complete understanding of a former mystery. Information which we now add, we subtract from what before we held to be a complete working principle and practice of a complete method for ALL cases.

In 1917 (Vol. 11), we ridiculed the "SYMPATHETIC" nervous system. We did not deny existence of A NERVOUS SYSTEM. We denied that what went on IN IT was "sympathetic". We substituted explanation of a direct brain-cell-to-tissue-cell continuity nerve fiber system.

Last editions of Gray and Cunningham have eliminated "sympathetic" nervous system. They now have an AUTONOMIC or VEGETATIVE nervous system. They, too, have substituted a direct brain-cell-to-tissue-cell continuity nerve fiber system. They give US no credit for the change.

We also ridiculed possibility of a "cranial" nervous system. We have since established a SUPERFICIAL, VISCERAL NERVOUS SYSTEM which is what its name indicates.

This mechanical chronic-hot-box heat-finder proved definitely when such occurred, where such existed, and in which cases it applied.

While we KNEW, IN PRINCIPLE, of these, we NOW KNEW when to apply them IN PRACTICE—AND THAT IS THE DIFFERENCE BETWEEN SUCCESS AND FAILURE ON 65 PER CENT OF OUR CASES.

We now LOCATE 100 per cent of interferences in 100 per cent of cases.

We VERIFY when it is.

We LOCATE when it is one of the doubtful 65 per cent.

We have ELIMINATED hunting, doubting, "fishing" of the Chiropractor.

We MAKE UNNECESSARY useless diagnosing, wasteful treating.

We do not wish to be understood as saying that, because this is true, 100 per cent of cases WILL GET WELL.

Unknown quantity ALWAYS will be present; case may be too old; condition may have gone too far; Innate may figure it is not worth while; case may not give sufficient time.

Given any one case of heart trouble, interference to transmission could be at the occipito-atlantal-axial vertebral location.

Mechanical chronic-hot-box heat-finder locates and accurately PROVES it. If this mechanical chronic-hot-box heat-finder is right in proving interferences and reductions in 35 per cent plus 65 per cent, how near wrong were we before?

If this mechanical chronic-hot-box heat-finder is right, in giving us new information about cord pressures or multiple interferences, how nearly right were we before?

If it is wrong for us to know 100 per cent of interferences, as we now do, were we right before when we hypothesized, guessed, and hoped we were right in 35 per cent?

Wherein is the wrong committed when we state we were wrong in 65 per cent?

Wrong is in proving wrong the fellow who is right and who wants to remain right, even tho wrong.

This mechanical chronic-hot-box heat-finder can exactly and correctly locate place of resistance to transmission of mental im-

pulses; will mechanically and scientifically do that which MIND tried to do in the past with an incomplete information at its command.

Chiropractic is based on TWO "theories" laid down in 1895:

1. Discovery of vertebral subluxation.

2. Transmission of mental impulses.

Both of these were denied by medical profession as being possibilities.

1. Spinograph PROVED the first. By use of scientific instrument, by scientific proofs, we took this theory out of field of hypothesis and put it in field of science.

2. Mechanical chronic-hot-box heat-finder PROVED second. By use of scientific instrument, by scientific proofs, we took this theory out of field of conjecture and put it also in field of science.

Previous to advent of spinograph, vertebral subluxation was a phantasy, a theory; it was a twisted kink of an imaginative condition. We did not palpate such, for medical men said no such could or did exist.

We introduced the FIRST spinograph (1910) to PROVE vertebral subluxation IS a reality; it is a fact in science; we prove such; and medical men are wrong.

Subsequent research with spinograph proved our palpation was often wrong; bent processes threw us off; what often appeared a subluxation was not such; what often appeared not to be a subluxation was such; altho some vertebrae were abnormal in position, foramina were not occluded; altho some vertebrae palpated normal in position, spinograph proved they were occluding foramina.

Advent of spinograph corrected previous errors. Its proof was ocular; its corrections were objective; its conclusions were prima facie evidence; its truths have since been accepted in Courts of Record.

We took this proof TO OUR FACULTY. Did ALL OF THEM admit its legitimacy? Were they glad to be corrected? Were they willing to admit previous errors? Were they seekers after truths—facts? Did they grow with growth?

"Do you mean to tell US you HAVE A MACHINE which can prove to us that our minds and fingers are wrong?"

"Can a MACHINE tell us things our minds and fingers cannot?"

We took hundreds of cases, after faculty had palpated and made listings; after they said they were subluxations and should be adjusted. We spinographed them, VERIFIED their work if it WAS RIGHT. In a MAJORITY it proved their listings WRONG. In a MAJORITY it proved they were NOT subluxations occluding foramina.

The faculty said we were "riding a hobby" — "let him rave", etc.

Thousands of cases further justified our conclusions. There existed a necessity for corrected instruction; we desired such in our curriculum. We suggested it be a regular subject in our course. Some of our faculty opposed it. They would appear before OUR classes telling them we were "riding a hobby"; "let him rave."

Opposition AGAINST such instruction developed in our classes. It was fostered by certain faculty members. They told us they would resign if we introduced it—and some did. An insurrection was imminent—in our faculty—in classes. Students would walk out if we insisted. We withdrew! There was nothing else to do!

Truth crushed to earth—.

We started a separate, private, optional course. Tuition \$25—later, \$50; one month; certificate issued. FIELD PRACTITIONERS came to learn; verified our findings as sound; verified and CORRECTED THEMSELVES IN FIELD PRACTICE. They began to prove greater percentages of results.

During Lyceums spinograph users would return and ask: "What's the matter with you faculty men?" "Can't you see the value of what's under your nose?" "Why do YOU deny and WE affirm the spinograph?" "Why do YOU oppose and WE demand?" "It MUST be taught HERE at The PSCI!"

The idea was born here. It was refused hearing HERE. It went INTO THE FIELD where it WAS RECEIVED with open arms. It rebounded back FROM FIELD upon those HERE. It boomeranged upon skeptics. When SUFFICIENT PRESSURE occurred, it was finally endorsed HERE.

Years later: Everybody takes it for granted NOW. It will be same with mechanical chronic-hot-box heat-finder! Human nature is ever the same. History repeats itself.

Definition for a subluxation USED TO BE "ANY vertebra that was out of apposition with its co-respondent above and below."

Definition for a subluxation NOW IS "Any vertebra that is out of apposition with its co-respondents above and below, wherein

that vertebra IS producing pressure upon nerves, IS interfering with transmission, and IS causing dis-ease."

PRINCIPLE always included all in LAST definition.

PRACTICE now includes all in LAST definition BECAUSE WE NOW PROVE IT SCIENTIFICALLY, by use of scientific instruments, to degree of scientific proof, to satisfaction of scientific men.

We have taken ten different post-graduate groups—some cream, some skimmed-milk—ranging from five hundred down to one hundred; a cross-section of our people.

Half were down for palpation; half were up as palpators. We marked backs, drew lines opposite TWO spinous processes. We asked those UP to palpate those DOWN and name vertebrae opposite those lines. We rotated those up on those who were down.

Record was kept of each person and his findings. We compared findings of those who rotated, on one back that was down. We found SOME off as many as six vertebrae; QUITE A FEW off at SIX; MORE OFF at FIVE; QUITE A NUMBER off at FOUR; STILL MORE off at THREE; TWO off was a regular thing. There wasn't ONE clear sheet where ANY ONE AGREED WITH ANY OTHER in any ten class tests of more than three thousand Chiropractors.

We tested this further. Half were down for palpation; half were up as palpators. We marked backs, drew lines opposite TWO spinous processes. We asked those UP to palpate those DOWN and name vertebrae opposite those lines. This time, we did NOT rotate palpators.

We then took a ten-minute recess, doing foolish stunts about the room, after which we returned SAME UP-fellow to same DOWN-fellow. We asked him to again palpate and count down and name vertebrae opposite those SAME lines.

Less than ONE PER CENT agreed with former findings TEN MINUTES EARLIER.

Why is this important? Why does it prove incompetency? No matter how perfect the principle or precise the practice, the BEGINNING step is wrong. No wonder sick do not get well!

CHIROPRACTIC IS NO LONGER AT MERCY OF MEN. At one time, Chiropractic had leaders; leaders had followers; followers believed what leaders taught them.

Chiropractors no longer need believe anything anybody says

or offers for sale. Chiropractors can take any idea into laboratory, give it acid test, prove it or find it wanting.

No longer is Chiropractic at mercy of any one man's theories, hypotheses, conjectures, or fancies. Observation, judgment, and experience are offset by a non-human mechanical chronic-hot-box heat-finder.

No longer is it a question of battle or opposition between teachers, schools, heads of schools, or adjustment methods. Now we have a means of scientifically weighing, checking, valuing each, and proving whether or not it accomplishes the Chiropractic objective.

2 x 2 equals 4—not sometimes, but always.

CHIROPRACTIC PRINCIPLE is that cause of ALL disease is in spine. Is that Chiropractic PRINCIPLE right or wrong?

If it is right, why? If it is wrong, why? If it has something lacking, WHAT?

Is there anybody amongst us who can present additions or subtractions TO THAT PRINCIPLE which will, because of such addition or subtraction, make it more right?

Are we justified today in amending this Chiropractic PRINCIPLE? If so, WHERE IS THE AMENDMENT, and WHO will propose it?

1. PRINCIPLE of Chiropractic: Find subluxation producing pressure upon nerves, interfering with transmission, creating disease.

2. PRACTICE of Chiropractic: Adjust subluxation, releasing pressure upon nerves, restoring transmission, creating health.

3. PRINCIPLE of medicine: Objective and subjective symptoms, pathology, physical examinations, diagnosis.

4. PRACTICE of medicine: Prescribe, stimulate or inhibit, operate, treat disease.

We know Chiropractors who would like to jump from end of Chiropractic PRINCIPLE to beginning of medical PRACTICE (read #1, then jump to #4, and see how it reasons).

We know medical men who would like to jump from end of medical PRINCIPLE to Chiropractic PRACTICE (read #3 and jump back to #2, and see how it sounds).

Where we leave off with our Chiropractic PRINCIPLE is where medical PRACTICE should begin. Where they leave off with their medical PRINCIPLE is where some Chiropractors would like to

have their PRACTICE begin. (Read #3, then jump back to #2 and see how inconsistent it is).

Are these Chiropractic principles and practices right or wrong?

Suppose we had a case with EIGHT diseases, in EIGHT different organs, in EIGHT different parts of body, thru EIGHT different nerves, producing EIGHT different pressures, interfering with EIGHT different transmissions.

Suppose we adjust ONE subluxation, releasing pressure upon EIGHT different nerves, restoring transmission to EIGHT different organs; and, given time, creating health in EIGHT different diseases. WOULD THAT ACCOMPLISH OUR CHIROPRACTIC OBJECTIVE?

We challenge any person to give ONE CHIROPRACTIC REASON why we should do anything to other SEVEN places.

We challenge you to give ONE CHIROPRACTIC REASON why we should do anything to other twenty-three vertebrae, three times up one side, three times down other.

That Supreme Courts have held such multiple methods to be orthopedic surgery is no fault of ours or yours. That man who proposed system of "general spinal mechanical alignment" does not know orthopedic surgery, is no fault of ours or yours. He SHOULD KNOW elements of scientific success or failure, legal distinctions between sciences, and elements of legal danger BEFORE HE OFFERS AN ORTHOPEDIC SURGICAL SYSTEM TO CHIROPRACTORS, AS CHIROPRACTIC.

You SHOULD KNOW whether or not it attains CHIROPRACTIC objective and is LEGALLY SAFE to use, BEFORE YOU BUY ANYTHING from anybody.

Orthopedic surgery is a distinct and recognized branch of surgery, professionally and legally. To practice orthopedic surgery within ITS objective is to exclude it as Chiropractic within ITS objective.

Orthopedic surgery has been applied to spinal column for hundreds of years. It confines itself to "mechanical corrections" of pathological conditions or curvatures of spine.

"Treatment" of these consists of six basic methods:

1. Machinery applied in large outfits especially made for that purpose.
2. Fixation in bone surgery.

3. Traction by strapping to ceiling or by stretching on specially-made tables.
4. Body applications, as in leather jackets.
5. Casts, plasters, etc.
6. Manual or other hand applications, designed to same ends.

Rebuttal of person who prefers "to do something" to spinal column, without a Chiropractic objective, might be:

"Province of Chiropractor is to adjust a vertebra."

He is wrong. There can be no "adjustment" of a vertebra.

"I didn't mean 'vertebra', I meant 'subluxation'."

Again he is wrong. "A subluxation" could be of any joint of body, other than those of spinal column.

We have now reached point where province of Chiropractor is to adjust *subluxation of vertebral column*. With this, we are agreed.

A subluxation of vertebra is where there IS pressure upon nerves, interference with transmission, creating dis-ease. Consequently, AN ADJUSTMENT can be given ONLY WHERE SUCH HAS BEEN PROVEN TO EXIST.

If any person did anything upon any vertebra which was NOT subluxated, did NOT have pressure upon nerves, did NOT interfere with transmission, and was NOT creating dis-ease, then he could NOT give an adjustment, could NOT release pressure upon nerves, could NOT restore transmission, could NOT restore health; hence he would be TREATING PATHOLOGICAL OR DISEASED VERTEBRAE without Chiropractic intent, motive, or objective; but with medical intent, motive, and objective, viz., orthopedic surgery.

If it isn't an adjustment, it IS a treatment. It can be an adjustment ONLY when it is upon CAUSE. If NO CAUSE is present, then it is treatment of EFFECT. If there is NO VERTEBRAL SUBLUXATION, then it becomes A VERTEBRA. If anything is done to A VERTEBRA which is NOT subluxated, then it is orthopedic surgery in theory and practice.

Questions remain:

1. Is Chiropractic principle and practice all sufficient to meet all Chiropractic issues?
2. Is there something lacking, in either principle or practice, which does not meet all Chiropractic needs?

3. If there is something lacking in Chiropractic principle or practice, is it to be found in medical or orthopedic surgery principle and practice?
 4. If we add orthopedic surgery principle and practice TO Chiropractic principle and practice, is it Chiropractic?
 5. If we add orthopedic surgery principle and practice TO Chiropractic principle and practice, shall we modify, amend, or change the term; or limit or enlarge scope of Chiropractic to embrace orthopedic surgery?
 6. If we add orthopedic surgery, are we amenable to present existing medical practice acts which now regulate practice of surgery?
 7. If we add orthopedic surgery, are we amenable to many present Supreme Court interpretations of distinctive, well-laid-down line of difference between medicine and surgery and Chiropractic?
 8. If WE add orthopedic surgery, can WE get Supreme Courts to change facts of sciences, thus changing THEIR decision in OUR favor, as against surgery, so WE can do what WE desire to do, because of rather than in spite of their rulings?
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Every Chiropractor directly concerned and interested in data akin to unfolding evidences of this Chiropractic movement will secure a copy of A BI-POLAR THEORY OF LIVING PROCESSES, by Crile.

There are three great medical laboratories in America:

1. Cabot at Harvard
2. Crile at Cleveland
3. Mayo at Rochester.

It was Crile who took our brain-cell-to-tissue-cell nerve fibre continuity idea into his laboratory and proved it sound; and, having proved it scientifically correct, proposed it to Gray and Cunningham. Anatomists got THE FACTS from Crile. Crile proved our idea in his laboratory.

In his book, Crile asserts:

- brain is one pole; body is other pole;
- between the two is a nerve fiber continuity which connects one to other;
- there is flowing from one pole to other an electric conductivity (E.C.).

- If there IS AN E.C. flowing from one pole to other, we have a LIVING PROCESS.
- Sometimes man is a DEAD PROCESS. If so, it must be accounted for on same "theory".
- If there is NO E.C. flowing from one pole to other, we have a DEAD process.
- Sometimes man is neither a LIVING nor DEAD process, but diseased, paralyzed, and it must be accounted for on same "theory".
- If there is a PARTIAL flowing from one pole to other, then we have a DISEASED process.
- This "partial" flowing of E.C. is due to an interference to transmission between one pole and other.
- This interference between poles is cause of every disease in body.

AND WHERE DO YOU SUPPOSE HE FOUND THIS INTERFERENCE? Just WHERE it was! And where was it? Just WHERE it was! It could not be found where it was not. HE FOUND INTERFERENCES IN SPINAL COLUMN—where they WERE. HOW do you suppose he found these interferences? Could HIS hands feel that which was beyond sensitivity of hands? No! He, too, constructed a mechanical chronic-hot-box heat-finder like one we had. And within what range did Crile have to come, to establish these facts? One-hundredth of a degree centigrade—same as we established. He used it and thus located interference.

WHAT explanation does he give?

- Interference to transmission of E.C. causes chemical reaction.
 - Chemical reaction causes increased oxidation.
 - Increased oxidation causes chemical combustion.
 - Increased chemical combustion produces increased heat.
- He admits *frankly* that E.C. is so minute IT CANNOT be measured;
- that interference to E.C. CANNOT be measured, for same reason;
 - that no scientific means exists to measure chemical reaction, increased oxidation, or chemical combustion.

He affirms there IS a scientific means that can measure most minute degree OF HEAT. In measuring INCREASED HEAT, he automatically measures, backward, chemical combustion, increased oxidation, chemical reaction, AND THUS INTERFERENCE to transmission of E.C.

(From anatomical laboratories at Cornell University, Ithica, New York, Doctors DeForest and Baldwin endeavored to claim discovery of the subluxated sacroiliac as cause of some diseases, while Dr. A. V. Hill of same institution announced he had measured almost vanishingly minute temperature raise in a single nerve fibre while using, in research, a delicate instrument so sensitive as to measure temperature changes as small as one-ten-millionth of a degree centigrade. How long will it be before medical schools will teach principles of Chiropractic—now that they have been proved?)

When did we first announce our mechanical chronic-hot-box heat-finder? In 1923.

When did Crile issue book just referred to? Fall of 1926.

Crile used other ideas of ours; why not this one?

ChiropracTIC was born of two PRINCIPLES.

ChiropracTIC, as a practice, has been developed around those two PRINCIPLES.

For many years those "principles" were called theories, vagaries, conjectures, hypotheses, philosophies, religions, and delusionary ideas of faddists and cultists.

Chiropractic began and continued existence because of objectives attained with use of those two principles.

Those theories from which Chiropractic sprang have now been proved SCIENTIFIC by use of SCIENTIFIC instruments.

What a pity Chiropractors, who publicly profess to know Chiropractic, have seen fit to throw away, one by one, these theories that even they could not believe.

What a pity Chiropractors, who publicly profess to know Chiropractic, have drifted from the Chiropractic essence that attained its very existence by use of those objectives.

What a pity Chiropractors, who publicly profess to know Chiropractic, have seen fit to drift into medical principles and practices which deny their Chiropractic existence.

What a pity Chiropractors, who publicly profess to know Chiropractic, must be compelled to listen to evidence of medical (Crile) experts, to prove Chiropractic to them.

What a pity Chiropractors, who publicly profess to know Chiropractic, must be compelled to listen to medical men, to believe that Chiropractic has developed and grown out of a theory into a science.

What a pity Chiropractors, who publicly profess to know Chiropractic, must listen to medical men tell them that Chiropractic principles are sound, before they accept same as a means to an end.

What a pity Chiropractors, who publicly profess to know Chiropractic, must be compelled to listen to the developer of Chiropractic quote medical men, to prove that principles he has developed or sponsored are sound.

What a pity that Chiropractors, who publicly profess to know Chiropractic, must be compelled to listen to the reason flowing from a medical source, before they can realize what they have.

What a pity Chiropractic, which was developed by Chiropractors, is now found thrown into a Chiropractic garbage can in Chiropractic alley; only to have a scientific medical rag-picker go thru that Chiropractic alley, pick up the Chiropractic discards, accept them as of great scientific value, endorse them, write books about them, and then have a Chiropractor quote that medical source to prove what our people threw away was of value.

What a pity to think Chiropractic was thrown away by Chiropractors; found by medical men; considered a fake and graft by those who threw it away; considered a masterpiece by him who found it; and, after proved a masterpiece by him who found it, is demanded back by those who threw it away.

Even as a boy, in very youth of our life and Chiropractic, we made a vow:

THAT WE WOULD LIVE TO SO DEVELOP CHIROPRACTIC THAT IT WOULD FIND AND LOCATE AND BE ABLE TO CORRECT A SPECIFIC CAUSE FOR EVERY DISEASE IN HUMAN BODY; AND TO SO DEVELOP THIS PHILOSOPHY AND ART THAT IT WOULD BE MADE SCIENTIFIC, WHERE IT WOULD BE RECOGNIZED AS SCIENTIFIC BY SCIENTIFIC MEN, AND SO PROVED BY USE OF SCIENTIFIC INSTRUMENTS.

We have lived to see that day. Having seen this come about, we have never had more to live for, to fight for, than now!

Chiropractic has reached that pinnacle—not that last word of attainment has been spoken.

But chiropracticoids are mired in the damp, dark valley of inefficiency, incompetency, and medical mud.

Never was there a time when IT was more worth working for.

Never was there a time when SOME of the profession have proved they were less worth working for.

CHIROPRACTIC is safe because the four major premises are now subject to scientific proof:

1. Existence of vertebral subluxation.
2. Principle that it produced pressures upon nerves and interfered with flow of a force between two given points.
3. Adjustment of a vertebral subluxation.
4. Principle that released pressures upon nerves restored this flow of a force, between two given points.

Subluxation and adjustment can be proved by spinograph.

Location of and effects of subluxation and adjustment can be measured by mechanical chronic-hot-box heat-finder.

What is position of average Chiropractor? Is HE safe? Can HE prove these principles in practice?

Can HE take these four major premises, before a group of scientific men, and prove them?

If he cannot, is HIS position permanent?

Can he prove that adjustment given has REDUCED pressure; has RESTORED transmission; HAS NOT reduced pressure; HAS NOT increased pressure; has actually INCREASED pressure; has actually REDUCED pressure; or, has actually REDUCED transmission?

If he cannot do this in daily practice, is HIS position permanent?

Chiropractic is safe, but the Chiropractor will or will not be safe according to whether he accepts or rejects those issues which have made Chiropractic safe.

It has been said we have made mistakes of wisdom, judgment—financially, professionally, and scientifically.

We have made mistakes—many of them. We have thought many things we wish we had not; we have said many things we wish we had not; we have written many things we wish we had not; we have printed many things we wish we had not.

As we check back and review carefully the many things we have thought, said, written, and printed, we find no error of major issue. Our “mistakes” were in feeding too much, too fast; acting ahead of proper preparation; being too frank with a group who could not stand pressure facts, believing we were talking to Chiropractic converts who understood Chiropractic philosophy.

We have thought, said, written, and printed many things for which we are SORRY.

For everything we have thot, said, written, and printed that we ARE SORRY FOR, WE ARE GLAD OF IT.

Difference between some men who make mistakes and other men who make mistakes is: some men make mistakes and permit them to bury them; other men make mistakes AND USE THEM AS STEPPING STONES TO ATTAIN SUCCESS.

Lindbergh did not fly to Paris in 1927 in airplane Wright Brothers flew at Kitty Hawk in 1903.

Between Wright Brothers and Lindbergh—between 1903 and 1927—were a million mistakes thot, said, written, and printed. Between 1903 and 1927 the path is strewn with personal, professional, financial wrecks made by different men who were making mistakes endeavoring to perfect a better, greater, more successful airplane.

Any man who TRIES TO DO THINGS makes mistakes. Making mistakes is proof of his TRYING to do things. Making mistakes proves HE DOES NOT KNOW. TRYING TO DO, proves he MUST make mistakes. IF HE KNEW, he would not make mistakes to find out. No completed thing of any great permanent value was ever completed WITHOUT mistakes. PRESENT DAY MAN measures PRESENT DAY MEN and deeds by their mistakes. HISTORY measures men by accomplishments—not by mistakes.

We ARE concerned in what you think of us today, but we are MORE concerned in what people will think ONE HUNDRED YEARS FROM NOW of what we do today.

That is difference between today and tomorrow—in history.

Since advent of this mechanical chronic-hot-box heat-finder, much has been said about and against it. It has passed thru years of fiercest white-heat bitter opposition. NOT ONE PERSON HAS YET CHALLENGED CORRECTNESS OF ITS PRINCIPLE OR DENIED ITS MORE EXACTING PROOF IN PRACTICE, OR PROVED IT FAILS TO ACHIEVE OBJECTIVES SET FORTH ON DAY OF ITS PRESENTATION TO THE PROFESSION.

“Chiropractic” was born of two theories. To bolster those theories, other theories were born.

From 1895 to 1922, our profession was builded on theories, hypotheses, for which we asked and received faith and belief of our followers in the man or men who propounded them.

Until 1922, our profession was building a structure based upon beliefs and faiths in principles advocated by one man who, by his dominant methods, held the profession in check in their beliefs

and faiths in these beliefs and faiths. Our profession looked up to and respected THE MAN who was able to develop those beliefs and faiths and hold them in check from running away from them. That we were able to do this at all was because fundamentally there WERE invisible facts behind the beliefs and faiths, even tho we knew little of them.

What happened in 1922?

There was introduced a scientific instrument which changed face of all this, which converted theories and hypotheses, beliefs and faiths, into scientific facts.

This destroyed theories as theories; hypotheses as hypotheses; beliefs as beliefs; faiths as faiths; and supplanted scientific facts which it asked the profession to adopt and accept as a substitute.

In one swoop, the leader took from under himself the infallibility of a leader and placed that infallibility in a scientific instrument and its findings. People living in house builded on sand, backed by invisible truth, were asked to move into a known house builded of rock on granite. Evolution was upon us, from theories to facts; beliefs to knowledge; a man to an instrument. Following of one faded away; following of other was yet to find itself. THE MAN lost confidence of his following; THE INSTRUMENT had to prove itself to gain what HE lost. It was inevitable—there always is a slump during every transition. When electric light came, kerosene lamp business slumped. When Pullman came, covered wagon business slumped. When automobile came, horse and buggy business slumped. When facts and knowledge came into Chiropractic, theories, beliefs, and faiths in Chiropractic slumped. In ratio, as confidence in what an instrument proved came in, value of any man's opinion in Chiropractic slumped.

A scientific instrument took place of theories. Scientific facts substituted beliefs and faiths. Knowledge substituted confidence in A MAN.

Stars were (in theory) demons until telescope (in science) proved them other worlds. World was (in theory) flat until Galileo suspended his ball and it circled, thus (in science) proving it round. Chiropractic was a maze of theories until spinograph and neurocalometer scientifically proved them. For years, Chiropractic was founded on beliefs and faiths in theories and hypotheses. NOW it is builded on scientific data which man can secure for himself. For years, Chiropractic was led by confidence in a man who posed as the leader of those theories and beliefs. NOW it is builded on scientific facts ascertainable with use of scientific instruments. For years, Chiropractic was at mercy of one man. Had anything hap-

pened to him, his theories would have been crushed to earth. NOW Chiropractic is at mercy of no man. It rests on demonstrable scientific facts. For years, one man had a following numbering 20,000 because they had belief and faith IN HIM, because he had more understanding in THEORIES than any other person. NOW, CHIROPRACTIC has a new-born following who gain scientific data based on ascertained knowledge in use of a scientific instrument which proves what it proves.

Chiropractic is and has been inherently a safe and sound working principle and practice.

Chiropractic always has, does now, and will more so in the future accomplish objective sought—health for sick. If it be right, if it get sick well, and if all this can NOW be taken out of theory and placed into science then no slump thru which it may go while passing thru a transition from one theory percentage level to a higher scientific percentage level can kill it or cause it to pass out of human service.

When we clearly knew what was happening, we knew what the future held forth. We knew the future of Chiropractic was assured, when we grasped immensity of transition thru which we were passing. We were going thru an evolution; stepping out of a belief into a science, and with that had to come the downfall of THE MAN and a replacing of that which follows data of scientific instruments.

We criticized Chiropractors who refused to keep pace with progress; but while criticizing the Chiropractor, we said Chiropractic was climbing the heights.

Much criticism was directed to "the program". Fact remains, however, WE set out to do TWO things:

1. To prove scientific existence of an abstract flow of force between brain and body;

- that this force could be interfered with in its flow;
- that this interference created a loss effect at periphery of nerves which carried it;
- that this loss WAS dis-ease in EVERY form;
- that this loss COULD BE RESTORED and health reestablished when this interference was removed and a gain effect created at periphery of nerves which carried it;
- which proved that this force could be restored in its flow;
- which proved scientific existence of an abstract flow of force between brain and body.

2. To find the solution of the 65-35 problem existing as a fault within our system.

Because facts laid down herein are sound; conclusions set forth are true; facts will stand any test given them; principles used will step up a human race efficiency—because it takes sickness out of medical, negative guesswork; puts it into Chiropractic positive knowledge; establishes an EXACTING understanding of CAUSE of ALL dis-ease; creates a fixed APPLIED ART as to WHERE AND HOW of its correction; which demonstrates HEALTH with mathematical interpretation; builds a universally agreed uniformity in our profession; produces a satisfaction between YOU, as Chiropractor, and HEALTH in patient, and an earnest desire to better serve both—THESE ARE REASONS FOR OUR CONVICTIONS.

At White House one day, during those troublesome days of Abraham Lincoln's administration, some gentlemen were present from the West, excited and troubled about the commissions or omissions in his administration.

President Lincoln heard them patiently, then replied:

"Gentlemen, suppose all you were worth was put in gold and you put it in the hands of Blondin to carry across the Niagara River on a rope—would you shake the cable, or keep shouting to him, 'Blondin, stand up a little straighter,' 'Stoop a little more.' 'Go a little faster.' 'Lean a little more to the south.' 'Lean a little more to the north.'"

"No, you would hold your breath as well as your tongue and keep your hands off until he was safe over. The Government is carrying an immense load. Untold treasures are in their hands. They are doing the very best they can. Don't badger them. Keep silent, and we'll get you safely across."

President Lincoln was once speaking of an attack made on him by the Committee on the Conduct of the War, for a certain alleged blunder, or something worse, in the southwest—the matter involved being one which had fallen directly under the observation of the officer to whom he was talking, who possessed official evidence completely upsetting all the conclusions of the Committee. The officer queried:

"Might it not be well for me to set this matter right in a letter to some paper, stating facts as they actually transpired?"

"No", replied the President, "at least not now. If I were to try to read, much less answer, all the attacks made upon me, this shop might as well be closed for any other business. I do the very best I know how—the very best I can, and I mean to keep on doing so until the end. If the end brings me out all right, what is said against me won't amount to anything. If the end brings me out wrong, ten angels swearing I was right would make no difference."

The Story of THE HOUR HAS ARRIVED

Preface

At Lyceum, Sunday and Monday evenings, August 24th and 25th, 1924, we delivered **THE HOUR HAS STRUCK**. In that, we set forth a prophetic set of principles correlated with a set of practices as allied to and with Neurocalometer as it then applied itself in our Chiropractic profession.

The other day, we again read that talk carefully, with hope of finding some place and some way where we could change principles or practices therein set forth; whether we would or could **TODAY** omit something or nothing from what was laid down **THEN**. After thotful scrutiny, we today say we would not change a fundamental. We have gone thru improvements of service; corrected mistakes; changed models and stepped-up efficiency of use of NCM; **BUT PRINCIPLES AND PRACTICES REMAIN THE SAME**—all of this after twenty-six years of a bitterly contested and most humanly gruelling test of whether or not what was laid down was right.

. Twenty six years! Much water has gone under bridge. Criminations and recriminations have spread themselves over thousands of printed pages; reams of letters have crossed the continent, many condemning, some commending; definite promises were made patent and lived up to; others said it couldn't be done, and produced infringements; were prosecuted and convicted. Resistance instruments came and were offered as a possible substitute; thousands of dollars were thrown into human sewers to try to scheme, sell, and serve something "just as good"; human lives have been trifled with by the great mass of unwashed; friendships have climbed to the top and now lead; organizations and work that took 25 years to build were washed away as though a straw, by flood of ill will—net results of BJ-NCM tornado is that **CHIROPRACTIC** has been rebuilt; principles made into sciences and proven; practices reversed from guess-work to definite and exacting sciences; and, what is more, NCM has come through unscathed, unscratched, with a healthier substantial daily growth in our work.

And what about him who staked his all on truth of his convictions; who was willing to face personal tirades, tornado that seemed to sweep all before it? His convictions deeper; his experience with human nature more mature; his confidence in mankind badly fractured; his ambitions more aspiring; the gulf between himself and people in general, wider; taking statements with a grain of

salt, and measuring people by deeds; more lenient of faults of others, and more considerate of his own mistakes. It has been a trying time, which tried all persons involved on either side of question.

NCMs were leased; many thrown on shelf, taken down, dusted off; used, and again discarded. Many leased, called fakes, thrown away—only to again get them out and finally prove them constructive in a permanent way. After this upheaval of our work, thousands of thrown-away NCMs have been exchanged for Model No. 2, and are in constant use. After twenty six years of trials, troubles, and tribulations, **THERE ARE MORE NCMs IN USE TODAY THAN EVER BEFORE**, permanently used by **SATISFIED** chiropractors who **KNOW** what they can do in improving Chiropractic with the sick.

Thousands said principle was wrong. Thousands said they were deceived, swindled, robbed. Thousands challenged man who believed it right. **BUT THRU** it all **THAT MAN NEVER WAVED IN HIS DUTY TO CHIROPRACTIC AND THE SICK**. He remained true to chiropractors. That man has lived long enough to see thousands come back into fold as sincere users of that instrument which aids and helps simplify and shorten time to get sick well.

In 1924 **THE HOUR HAD STRUCK**. In 1950 **THE HOUR HAS ARRIVED** when NCM is established and no one has successfully challenged its scientific service; whereas thousands have successfully proven it **IS** a Chiropractic necessity in Chiropractic service by a Chiropractor.

Verily, we say again unto ye: **THE HOUR DID STRIKE** in 1924; and **THE HOUR HAS ARRIVED** in 1950 for a complete vindication of NCM and the man who invented it, as well as man who endorsed it and stood hard by during those stormy and troublesome years to see that it came into its own.

Evolution has taken place. Little, if any could have been possible if it had not been for loyal Chiropractors who remained true through trying years. They were friends in need and friends indeed. Your courage and steadfastness helped us to keep on keeping on over rough roads. When the bottom began slipping from under, the majority left. When bottom began slipping from under, a few remained hard by. If it had not been for you handful, at first; then scores; then hundreds, and now thousands, Chiropractic would have been lost. You and we don't count; we'll go out of the picture some day, but **CHIROPRACTIC** is a right principle and practice of human service; it must live in its purity for posterity. A few

understood THAT; a few fought for THAT; THAT is what made some of us and some of you consistently fight the great fight thru.

Doss Evins developed the NCM, patented it, and helped to develop its service. He had confidence in us; continued to express that loyalty never faltering for one second. He remained loyal to The P.S.C., to Chiropractic, and to us. There never had been a scratch of a pen in our business relations. Men who work for same objectives, who are honest and sincere, do not need any.

And, there's that portion of our Faculty who stood hard by, who were devoted to Chiropractic; who never wavered—ask of them what we would. They sacrificed years of their lives; they pulled up their belts when pickings were thin and clouds getting darker. We hope you honor them!

Much credit goes to our few trusty field lieutenants who stuck with us in blind faith, believing that a man's FUTURE was indicated by his PRESENT, which was predicated upon his PAST.

In 1923, we made what many construed a false move, in adopting NCM. Thousands of friends whom we had succored, gave a professional life of ease to, made fame and fortune for, disregarded our 25 years of true and faithful service in a moment, and deserted us. Gradually the tide began to turn. Today it is turned.

THE HOUR HAS ARRIVED for the ascendancy of that old fighting, domination leadership which saved this ship through thick and thin; held it against all common enemies, within and without our ranks. We believe your profession is waiting for that leader. He has NOT been found elsewhere. Twenty six years the profession has been seeking one. Twenty six years they found none present. "Leaders" have arisen by hundreds—vacillating, compromising, yielding, ducking, evading, building organizations; destined to do aught but act as playgrounds for vanities and egotisms; none placing CHIROPRACTIC greater than self; and no man is a leader in any crusade until he is willing to sacrifice himself for the cause he represents.

Definitions

OLD terms are here used in the NEW sense. Unless each word is read with NEW understanding, its full application will have been lost. NEW interpretations of OLD terms bring forth NEW definitions. If, as you read, you are in doubt as to the intended NEW meaning, we suggest you refer to this glossary of NEW definitions of OLD terms. Some definitions include less than formerly; others more. Some are broadened, others narrowed in principle and prac-

tice. In no sense, does any change any principle or practice from original conception of Chiropractic.

MISALIGNMENT is a condition of three correlated vertebrae, less than a SUBLUXATION, which possesses two of former elements of what we then construed as a SUBLUXATION, but which is NOT a SUBLUXATION in fact. A MISALIGNMENT could be a vertebra out of alignment with its correspondents above and below; palpation would reveal all former elements of a "subluxation"; it could have contiguous taut fibres, tender nerves, or contracted muscles; and, under former construction would be called a "subluxation"; it could even have contiguous to itself, on one or both sides, NCM nerve pressure heat peak readings—and still not be a SUBLUXATION in fact. A MISALIGNMENT could as well exist in a dead body as in a live one. (See definition of SUBLUXATION by contrast.)

Alignment is a condition of three correlated vertebrae when they are apparently in approximately normal relationship to each other, which condition does not prevent any of the elements noticed under MISALIGNMENT.

REALIGNMENT is what might happen to a vertebra as the result of an action upon the part of an external agency; using applied force, either violent or passive, internal or external, which changes a MISALIGNMENT to an ALIGNMENT; in which any one or group thereof, or all of elements which make a MISALIGNMENT may be eliminated, or present. To REALIGN a MISALIGNMENT into an ALIGNMENT may or may not TEMPORARILY change any of the elements of one to that of the other, but would only do so PERMANENTLY accidentally.

SUBLUXATION is a condition of three correlated vertebrae, more than a MISALIGNMENT, which have in part lost their normal relationship in a juxtaposition, where it DOES occlude a foramen; DOES produce pressure and resistance to transmission of mental impulse supply between brain and body; and DOES thereby become THE cause of dis-ease in one specific place in body above.

Subluxation can be ascertained as to location ONLY by use of some delicate and sensitive instrument which CAN ascertain presence of above existing elements. A SUBLUXATION must possess all elements present in a MISALIGNMENT; all, if present, make it a SUBLUXATION. A SUBLUXATION can exist only in a LIVE body.

A SUBLUXATION could have any of the earmarks of a MISALIGNMENT but a MISALIGNMENT would have only some or none of the earmarks of itself and only some of those of a

SUBLUXATION.

The elements of a SUBLUXATION are:

- 1st. It *must* be out of relationship to its correspondents above and below.
- 2nd. There *must* be an occlusion of a foramen or spinal canal.
- 3rd. There *must* exist a pressure or tension upon spinal nerves or spinal cord.
- 4th. There *must* be present an interference to transmission of mental impulse supply.
- 5th. Resistance of that transmission is always present.
- 6th. An increased abnormal local resistance heat is present in adjacent immediate tissues.
- 7th. Taut fibres.
- 8th. Tender nerves.
- 9th. Contractured or prolapsed muscles.
- 10th. Under palpation, an irregularity of position may be ascertained.
- 11th. Spinograph may illustrate a misalignment of correspondent position.

Whenever the word "subluxation" is used with quotation marks (" "), it signifies term is used as formerly applied to what is NOW construed as a MISALIGNMENT for purposes of contradistinction between terms as EXACTLY applied NOW to a SUBLUXATION and as loosely applied to a MISALIGNMENT which may be termed a "subluxation" when it is in fact not such.

Example: The case had ONE SUBLUXATION but there also appeared SEVEN MISALIGNMENTS, all eight of which were formerly called "subluxations".

ADJUSTMENT is the result of an action, upon a SUBLUXATED vertebra, upon part of CHIROPRACTOR, using external applied force, meeting with internal resistive force upon part of a live sick patient, intentionally located and intentionally positioned, which changes SUBLUXATION to its normal apposition with superior and inferior correspondents; which information is secured by use of spinograph to secure knowledge of POSITION; which, because thereof, reopens occluded foramen, releases pressure upon nerves; reduces interference to transmission; lessens resistance and restores transmission of mental impulses between brain and body; and does thereby ADJUST cause of dis-ease in one or multiple

places in body below, or above. ADJUSTMENT can be given ONLY upon a SUBLUXATION. An ADJUSTMENT can be given only to a living body.

"THE ADJUSTMENT WITH THAT EXTRA SOMETHING" is SUBLUXATION that is ADJUSTED which remains in normal situation for an extended period of days or weeks; which makes possible A CONTINUED open foramen; which permits a long CONTINUED flow of mental impulse supply; which gets cases well quicker and reduces number of places necessary to "adjust"; proves that each ADJUSTMENT is such in fact, and makes possible a definite knowledge of WHERE, WHEN, and HOW to ADJUST. "The adjustment with that extra something" releases interference at one place without creating more at others; thus making it THE SPECIFIC ADJUSTMENT.

"The adjustment with that extra something" is net result of additional accumulative constructive survival value that accrues as a result of an exclusive Innate recoil ADJUSTMENT upon a SUBLUXATION which was major in each case. It is marked brevity of time and rapidity with which cases get well in contrast to long time and slowness with which cases formerly got well, even though by accident, wherein case was "adjusted" upon many "subluxations" none of which were ADJUSTMENTS UPON SUBLUXATION which was THE cause of that case's sickness.

Whenever the term "adjustment" is used with quotation marks (" ") it signifies that term is used as formerly applied to what is now termed "subluxation" for purpose of contradistinction between term as EXACTLY applied to a SUBLUXATION and loosely applied to MISALIGNMENT when it is in fact not such. Example: You can give an ADJUSTMENT to a SUBLUXATION but you can only "adjust" a "subluxation." To do anything to MISALIGNMENT is to REALIGN it, even though loosely called an "adjustment".

"Permanently" is used here to mean what it implies and yet must be construed in an elastic sense for nothing permanently IS permanent. Example: A case today comes with a certain condition. We find THE major, give ADJUSTMENT, the case gets "PERMANENTLY" well. In another place we mention, that "once a major always a major". The case returns, at some future date, with different condition and the SAME major should be ADJUSTED. Was the original ADJUSTMENT "permanent"? Yes, for first condition; no for second. Comparatively, some things are more permanent than others.

"above - below"

"inferior - superior"

"higher - lower" are terms frequently used.

These terms mean:

"above" is superior; as cervical are above or below or inferior to dorsal region.

"higher", as a 2-point reading is HIGHER than a 1-point reading.

"lower", as a 2-point reading is LOWER than a 4-point reading.

NEUROCALOMETER is a sensitive, delicate, comparative heat reading instrument which locates interference to transmission of mental impulse supply between brain and body; which locates all nerve pressure heat reading interferences BEFORE ADJUSTMENT and discriminates, by process of elimination, which ones represent TRUE INTERFERENCES and those which are but effects and symptoms of interferences at more distant or remote places in spinal column area of a sick man. Its use, intelligently interpreted, instructs a chiropractor whether his case is getting better or worse; whether he has located the SUBLUXATION or not; one he is ADJUSTING for. It proves which readings are direct, which are indirect; which places are SUBLUXATIONS, which ones are MISALIGNMENTS.

The SPINOGRAPH follows competent use of an NCM and gives a true picture of position of all vertebrae in vertebral column region, determining where there exists a SUBLUXATION as found by NCM. It gives information as to direction of ADJUSTMENT to accomplish objectives sought as defined under ADJUSTMENT.

See What You See

There is little difference between people, on a scale of avoirdupois. Difference between people lies in length, breadth, and depth of mental understandings of things, which prompts action.

The only difference between "great" men and "ordinary" men, lies in their ability TO SEE that which others look at.

The old Biblical quotation comes in appropriately: "We have eyes and see not; ears and hear not."

Great men are ordinary men, except great men see and ordinary men do not. The great man looks, sees, and interprets what he sees. Seeing, he has ability of interpretation. Ordinary man looks, does not see, and does not interpret; therefore is an ordinary man.

In the great cosmos are many things yet unseen. Some man,

some day, will look and see another interpretation. He will be hailed as a great man. Einstein saw more than another; therefore Einstein is great. Yet, what he saw has always existed. He, however, was the first man to look AND SEE what he saw.

If we have one common complaint amongst group chiropractors, it is that majority do not even look. Many look, but do not see. A few look AND SEE; therefore stand out.

Many Chiropractors ran fingers down the back and could not palpate. They glided their fingers, but their fingers did not feel; therefore they did not receive or interpret what they were feeling. Others could run their fingers down same back; and, if they ran their fingers down often enough, could eventually feel an irregularity. Others would run their fingers down ONCE and feel EVERY irregularity. What they all felt was in common; some never concentrated their minds; some concentrated, if they went up and down enough times; some could go down ONCE and get interpretation.

Many Chiropractors look at a spinograph a thousand times and see nothing. Others will look, see nothing; but if somebody points out irregularities often enough, they may eventually see something today and lose it again tomorrow. Others will look, study contours, relationships, study positions comparatively, and point out irregularities. This ability to look and see is most essential.

Elbert Hubbard said: "Next to seeing a thing yourself, and doing it independently, is the ability to do it when somebody else sees it and tells you how to do it." This ability to see FOR YOURSELF is woefully lacking in majority of people. Some never see, even though others show it to them. Some can see if given time, if pointed out often enough. That is holding Chiropractic back—keeping it from rapidly becoming a universal system of getting sick well.

Many Chiropractors will take NCM in their hands, glide it up and down the back, report there are no readings, anywhere. Others find a few. Some will find genuine readings. Some find it necessary to glide many times and get nothing. Others will glide a dozen times to get a few. And still others will glide ONCE and get all.

What is the difference between people? Is it education? Environment? Training? Not necessarily. Even though a man be educated, if he does not see what he is looking at, he does not see. SEEING IS MENTAL CONCENTRATION ON THING YOU ARE LOOKING AT WHILE YOU ARE LOOKING. While you perform a certain act, put every mental power on that ONE thing,

while you are doing **THAT ONE THING**. Let nothing detract from value of concentration.

Questions asked; moving of people; talking in neighborhood **MUST** be blotted out while you focus **YOUR MIND** on that immediate thing you do **RIGHT NOW**.

During the course of a year, we receive many letters asking many questions regarding NCM technique: "Where are readings? What is a reading? When will I know I have one?" Many questions are legitimate; but had you concentrated **WHILE GETTING INSTRUCTION**, this would be unnecessary. Majority of questions are from those who look and see not.

You look at dial; dial will give a reading; and then you ask instructor if that **IS** a break? Saw it, didn't you? If you **SAW** it, **YOU SAW IT**, didn't you? If you **SAW** it, why ask **IF** you saw it? Why can't you see what **YOU** see? Why must we constantly look thru another's mind? Why can't we see what **WE OURSELVES** see?

Fifty per cent of problems in NCM technique will be solved if you **SEE WHAT YOU SEE WHILE YOU SEE IT**.

Generation, Transmission and Expression

From mental impulse knowledge, we know nothing about what is meant by generation, transmission, or expression. Each term is important; for that is what happens as working function to create, transport, and express what **LIFE IS**, what forms or transformation it goes thru. All we know is its expression.

We **KNOW** if you cut head from body, body goes dead; we **KNOW** if you section a nerve, no function occurs at periphery; or if you produce pressure upon that nerve, you paralyze function; therefore it does not act. By results, or absence of them, we ascertain definite facts, viz., **BRAIN** is seat and source of **GENERATION** of **TRANSMISSION** of intellectual energy between the brain destined for body; the **BODY** is location of all physical action, called function, which is personification of what was created in brain. Three phases of function, then, are important: generation, transmission, and expression.

The question: "Why do we get reading at atlas and why does a reading check out below by **ADJUSTMENT** at atlas?" Simple answer is that superior location **IS** a **SUBLUXATION** producing pressures upon nerve fibres having their exit at that place, and also producing pressure upon fibres which have exit at the inferior spot. That they both check out because of **ADJUSTMENT** at superior place is evidence it does effect both places.

Let us hypothesize. Suppose brain cell is origin of nerve fibre, passes thru foramen magnum, thence thru spinal cord, has its exit below, finally terminates at an organ—say appendix. Suppose normal body temperature were 98. The brain temperature would be 98. The spinal cord temperature would be 98, DOWN TO POINT OF INTERFERENCE AT ATLAS. There it raises to, say 101. Temperature between place of interference (atlas) and place of emergence from cord in spinal column (2nd L) would be lower, or 100. Follow that nerve out of its periphery (at appendix) and you have appendicitis. This suggests temperature all along path of fibre, between place of interference to manifestation of inflamed tissue at exit from spinal column—the 2nd L. Adjustment at atlas reduces reading not only AT ATLAS, but also at SECOND LUMBAR as well as in APPENDIX.

If there is subluxation, with occlusion, with pressure, with interference, with resistance, with diminishment of transmission beyond the point of this—three phases of one individualistic function are disturbed, viz., generation, transmission, and expression; main changes being transmission and expression, least to be disturbed being generation.

However, there is ONE phase we have all been prone to almost overlook, viz., what happens to brain. In past, we have taken position that Innate brain cannot be affected and Educated brain could be and often is in phases of insanity, which is subject to grades of variations of interpretations. But there remains one doubt which will be cleared up: what happens to Innate brain when body goes thru a process of auto-intoxication; interpoisoning? Function flows from Innate brain to spinal cord thru spinal nerves, to kidneys. Subluxation occurs along path of this nerve, enroute, carrying function to kidneys. Kidneys become paralyzed; inactive. Poisons are now dammed back into body. All portions of body become involved with an internal absorption of this internal poison. What right have we to presume that Innate brain is exempt from absorbing some of this, same as other parts of physical body? If Innate brain can and does absorb poison, where is IT to receive ITS source of power from, to rebuild itself? And, if it does become intoxicated, how is kidney to receive a normal supply of healthy mental impulses, when subluxation below has been corrected; when brain that generates them is not normal within itself?

Granting that Innate brain is source of all mental energy, mental impulse supply for all body; granting our major is found close to skull line as in atlas or axis; granting this does occlude lumen, produces pressure, constricts nerves, offers resistance and interference to transmission—might this congest and congeal backward onward

flow of thought-power intended for body? Might some of it work itself out as increased heat at point of resistance; and yet rarely do we get a NCM reading at this point that will rise much over 3 or 4 points. We do know adjustments here get our gross number of cases well. Might it be that there is a damming back of mental impulses, especially when it is close to source of generation? And if this be a possible explanation, would this affect Innate brain more or less, and thus react directly upon other parts of body, though their nerves be free from interference to transmission below point of exit in spinal column? Might it be that an adjustment at atlas or axis does more than release spinal cord pressure, more than restore normal transmission inferior to itself; might it actually release congestion superior to itself and thus clear all transmission below in organs that otherwise would be sick? Might it be that actual local atlas or axis resistance might be low, and then superior internal brain congealing or damming back might accentuate brain interference which cannot be read, although manifested below in many places, in many ways?

One of the inconsistencies in what is taking place is: you and we have cases; we palpated, found "subluxations" according to meric system; we "adjusted" them; cases have gotten well. Let us remind ourselves we were, in those days, "adjusting" every "subluxation" deviation which WAS a "subluxation"; hence rarely a superior cervical, atlas or axis did not come in for its share of ADJUSTMENT at same time we "adjusted" merically below. Any conclusion based upon what happened below, could have happened from above and we not know it.

Granting meric system was correct, that certain diseases in certain organs did get well by certain "adjustments" according to that meric system—how account for apparent contradiction when today we get same cases well by ADJUSTING ONLY a superior cervical subluxation SPECIFIC major, and do not touch inferior ones? We formerly "adjusted" atlas and 6th dorsal, S.P., and got case well of indigestion. Now we ADJUST only atlas or axis SPECIFIC and get the case well of indigestion.

Health is life; life is function; function is motion; motion is bodily musculature in activity; normal muscular activity is induced by continuous mental impulse supply; any breakage in continuity of that continuous mental impulse supply would be either a contracted condition of muscles or a prolapsis of them. Grant that is a composed mass of all nerve fibres that gather and pass downward, out thru foramen magnum, down into spinal cord, finally separating as they proceed downward through spinal canal and pass out between intervertebral foramina, eventually to reach all

musculature of body, including various five layers of muscles of back. Function flows from above, downward; within, without; from brain to and thru spinal cord, thru intervertebral foramina to and thru all muscles, including five layers in back.

Now comes a SPECIFIC major superior cervical subluxation. It creates cord pressure and interferes with a multiple series of transmission inferior to itself thru those fibres that distribute and ramify at various inferior places, many into various five layers of muscles of back which have to do with supporting and directing functions which support and hold erect various segments of vertebral column. Some of these muscles could become paralyzed, allowing one side to prolapse and the other normal side to apparently be contracted, thus pulling a local meric system vertebra out of normal alignment. Some of these muscles could become contracted, allowing one side to pull over and above opposite or normal side, pulling a local meric system vertebra out of normal alignment. Along comes meric system, palpating Chiropractor, finds this misalignment "subluxation," gives "adjustment" upon it, releases its local meric system "pressure"; taut fibres and tender nerves which he found, as well as contracted muscles which he discovered, all disappear immediately and may so appear to be gone for a while; slowly but gradually case admits "improvement" and eventually is dismissed "well". But, was he then or is he now?

Retrospect, by comparison, what we are doing today. That case of yesterday took months and years to get that "subluxation" "adjusted". We kept hammering many, every day—sometimes for years. We wondered why it DID take so long. We noticed that while our cases got "well", some of which stayed well, there was usually a certain amount of relapsing going on in many—they just didn't stay put.

The SPECIFIC now explains what happened. SUBLUXATION was superior. Until that was ADJUSTED, muscles would continue to pull vertebrae out inferior. While we could give an "adjustment" INFERIOR, it wasn't and couldn't be an ADJUSTMENT, because IT was NOT CAUSE. Today, many cases of "subluxation" inferior are "adjusted" without being touched by adjusting ("the adjustment with that extra something") the major SPECIFIC SUPERIOR.

Today, we do less and accomplish more; we intentionally ADJUST superior on a SPECIFIC major, and we automatically "adjust" many meric system "subluxations" inferior. Whereas before it took a long time, now it's a comparatively quick job; whereas before meric system "subluxations" would not stay ADJUSTED,

SPECIFIC ADJUSTMENTS stay put; whereas before it was more or less discouraging work, demanding a lot of faith—today it is encouraging work and demands much knowledge.

The Whole Picture Changes

There was a time when patients came, we asked them how they felt; where they felt, and what difference they felt between now and then. When they would tell us they had a headache, we figured where in the head; whether it was direct or adaptative; and then decided it was a certain "subluxation" at a certain place. If they had stomach ache, we picked S.P., and by the time we got thru with that history, we had several places picked for "adjustment", based on symptoms they recited and their locations. Process was little different than medical man's shot-gun method. He would get symptoms and then give a drug for each. We listed all diseases and gave a shot-gun "adjustment" at many places—one for each disease in each organ. We duplicated his trick, except we gave many "adjustments" for many diseases, whereas he gave many drugs for many symptoms.

Now they arrive first day; no history is taken; none is needed. We use NCM to LOCATE nerve pressure interference; spinograph to gain knowledge of POSITION of subluxated vertebra at that place. We ADJUST and check to see what effect THAT subluxation has had upon EVERY OTHER reading up and down entire spinal column. If it changes evaluation, either increasing or decreasing; and it does this consistently day after day, week after week, it is proof that ONE subluxation is creating MANY readings, rather than ONE "subluxation" for every reading for every disease in every organ or symptom that patient complained about.

What happens when patient comes, day after day, and complains of ill feelings in body, and yet there is no nerve pressure interference at major ascertained in manner described? We are convinced such are retracing adaptative reconstruction or rebuilding mental interpretations.

Whatever happens produces its mental interpretation, be it good or ill; and it will be ill so long as physical condition is not normal; hence we get ill interpretations and will continue to do so until patient IS well. We are prone to think that because we HAVE ILL feeling, it MUST be bad; and therefore demands "adjustment", whether there exists NCM interference proof for its necessity or not. We cannot permit judgments to be warped by what THE PATIENT tells; for if we do, we will be "adjusting" every symptom, ache or pain everywhere, all the time, as we have done in past. We ADJUST ONLY when there IS ACTUAL nerve pressure inter-

ference AT MAJOR, and this exists ONLY when it is present, and when; its opposite indicating there is NO necessity for ADJUSTMENT.

In past, we have only occasionally been giving an ADJUSTMENT, and by accident as to place and time. Now we give an ADJUSTMENT by intention as to time and place. In former days, when we gave one, it might have lasted an hour or two, with a continuous current flowing for an hour or two, gradually dwindling down until it was off again for balance of 22 or 23 hours; hence no great amount of recovery could occur, in 24 hours or a week. Now we give an ADJUSTMENT; it holds for a period of 28.6 days; hence a CONTINUOUS FLOWING of MENTAL IMPULSE HEALING CURRENTS for 24 hours a day FOR MANY DAYS, thus multiplying the rapidity of getting case well, cutting down time of recovery, reducing materially time necessary to get well.

Let us again hypothesize a case of eight heat readings, seven of which are heat readings and one of which is a nerve pressure heat interference reading. In previous days we would "adjust" all eight. One of eight would be THE one which should be ADJUSTED. We would give it what we called "adjustment"; it would stay off pressure for an hour or two—maybe slightly longer—then come back again. We would get good from major for maybe 2 to 6 hours out of 24. Other seven places we would give what we called "adjustment", none of which needed "adjustment"; creating local harm at every one. This procedure on seven places would hinder rapid recovery of case.

Looking back on our failures, we have been hindering progress more than we have been helping. We thot we were doing everything, every place, exactly right. We now know, by contrast, much we did was deleterious, not constructive in our failures. We are doing less today than before; but we are doing more CORRECTLY DONE than before; hence we are doing LESS WRONG than before. Difference between little done RIGHT and much DONE WRONG, is difference between months and weeks in recovery and reducing per cent of failures.

In that lies "the ADJUSTMENT with that extra something", for additional step upward and forward—WHEN THERE IS NO INTERFERENCE, THEN THERE IS NO NECESSITY FOR ADJUSTMENT. We must learn to rely upon NCM as truth teller, rather than patient's telling of his or her ills, symptoms, and feelings. WHERE is determined BY NCM. When is determined BY NCM. So far as reliable information from patient is concerned, it can be discounted completely and entirely. Follow patient's lead

and he will get worse; or, if he gets well, it will be in spite of him rather than because of what he tells you.

We Begin to Discriminate

In early days, we BELIEVED (and we use that word advisedly) whenever we palpated a spinal deviation from normal spinal alignment, automatically condition DID produce a pressure upon nerves; therefore DID interfere with transmission of mental impulses; hence WAS location of A cause of some disease at periphery of THAT nerve. Hence we found MANY causes for MANY diseases; or ONE vertebral subluxation cause for EACH disease.

There was a time when we ran tips of fingers up and down a back and each and every deviation we found from median line of spinous or transverse processes was a SUBLUXATION. We so called it and so "adjusted" it. Average, per person, was twelve.

Then came spinograph, which showed many "deviations" which we palpated were bent spinous or transverse processes, and were not SUBLUXATIONS in fact, insofar as the centrum was in situ with ones above and below and were not occluding foramina. This reduced our average, per person, to about nine.

When spinograph came, it eliminated deviations as SUBLUXATIONS by proving they were bent spinous processes, etc; therefore, that conclusion hypothesized they could NOT be subluxations and were NOT producing pressures upon nerves or interfering with transmissions of mental impulses.

Then came majors and minors principle. Grant all nine were SUBLUXATIONS, some of them were of greater importance to life than others. Important ones should be adjusted first, letting others come later. This reduced us to an average, per person, of two or three.

Then came NCM. This gave us accurate knowledge of WHERE interferences actually existed. This reconstructed our education on what deviations were, no matter how ascertained. It constructed frequency of SUBLUXATIONS. NCM No. 1 brought out many. NCM No. 2 reduced it to actual worth. No. 1 found EVERY heat peak. No. 2 found THE interference. NCM No. 2 brot us to SPECIFIC.

As we gradually went thru this evolution in principle, our practice followed.

NCM No. 1 was to revolutionize entire question. Instead of mentally hypothesizing WHERE pressure was, we had a delicate instrument which would locate it for us. It read hot spots and they were many. The placement technique found more hot boxes than

fingers did deviations, or spinograph corrected us on; or misalignments which we palpated, which we had been correcting with spinographic interpretation.

NCM No. 1 found MANY locations of interferences, peaks in break readings, each of which was construed as proof of a location of interference. We began "adjusting" each and every place for each and every interference found. This builded up a multiplicity of places. Little did we know then what was in store for us in future.

Now comes SPECIFIC idea, determined and ascertained by gliding technique of instrument No. 2. It did, by itself, that which was formerly done by instrument No. 1, reading into picture both kinds; the Prossergraph reading out one kind, separating it from other. No. 2 automatically separated mean line heat from nerve interference heat, proving one was not an extension of other; but was a pathological product of other, and not a cause in itself, but caused by other. This materially reduced number of nerve pressure traumatic "adjustments" per case, down to one.

Step by step, idea by idea, we march onward in elucidating problem of where we adjust, when and how.

What We Do Mean By "Specific"

Various opinions are held as to what is meant in use of term "SPECIFIC". Perhaps it would be well if we defined it by stating elements which compose it.

It is WHERE, WHEN, AND HOW in a more EXCLUSIVE interpretation OF THE CHIROPRACTIC PRINCIPLE with a BROADER application of THE CHIROPRACTIC PRACTICE than heretofore. Difference between knowing WHERE, WHEN, AND HOW, and not knowing, makes difference between success and failure.

- 1st. It refers to NCM No. 2 location of interference, rather than mental determination by digital palpation or history of symptomatology or pathology or other diagnosis.
- 2nd. It includes SPGH determination of position, rather than an average of 6 to 10 or all of them regularly and daily.
- 3rd. It prefers ONE subluxation, rather than an average of 6 to 10 or all of them regularly and daily.
- 4th. Its record suggests one multiple interference rather than many local interferences scattered up and down spinal column.

- 5th. Its results justify one major, rather than many minors, or one major and several minors.
- 6th. One specific ADJUSTMENT ("the adjustment with that extra something") at one place, rather than various diversified technique "adjustments" at multiple places, daily.
- 7th. One ADJUSTMENT ("the adjustment with that extra something") covering several days or weeks; rather than many "adjustments", many places, daily, few of which stay put 24 hours.
- 8th. One continuous flowing of mental impulses, covering a continuous flow for days or weeks; rather than many local flows, flowing spasmodically, temporarily—the pressures of which reoccur.
- 9th. It presents a marked reduction in time necessary to recovery, rather than drag out a case for months or years.
- 10th. It proves that we can ADJUST less frequently ("the adjustment with that extra something") but more certainly, to consistently get case well once and for all; rather than jab away at many places daily, to get them well, sick again, well again, sick again—may be to ACCIDENTALLY get well or to leave them permanently sick; where health was AN ACCIDENT in spite of us rather than because of us.
- 11th. The normal right mixture of all above tells us when not to ADJUST (the adjustment with that extra something); that a daily "adjustment" is injurious and that it is actually dangerous to "adjust so many places so frequently, when none was needed, demanded, or justified".

Sometimes personal experiences will reveal more internal facts than external observations upon cases other than ourselves. Up to 1923, we never knew what our major was for troubles we had. Model No. 1 picked our majors as either atlas or sixth cervical—sometimes one, sometimes the other, occasionally both. Since 1923, it matters not what we have, where we have it, or how—either one or both majors will take it out. We do not have anything else ADJUSTED anywhere else.

This proves to us that, once we pick A major in A case, we can get him well by staying with it. If, in future, he should get sick, no matter where, what, or how, we can go to that SAME major, find it, ADJUST it, and get him well. We can become definitely and positively the family doctor knowing his case; knowing WHERE his specific is; knowing HOW to ADJUST it to get him well.

All Subluxations Are Misalignments, But Not All Misalignments Are Subluxations

If SUBLUXATIONS occur, specifically in cervical region, then what are those conditions which we find below, which we formerly construed as SUBLUXATIONS?

The hour has arrived when a distinction must be made between a misalignment that IS a subluxation, and a misalignment which is ONLY a misalignment; between a SUBLUXATION which IS occluding foramen, producing pressure upon nerves, and does interfere with local as well as a multiplicity of transmissions having various exits below itself; and some vertebra which is out of alignment in relationship with ones above and below, but does not and is not occluding a foramen, producing pressures upon nerves, and is not source of interference with transmission because thereof.

PALPATION will reveal no difference between misalignment of vertebrae below, which are MISALIGNMENTS, and those above, which are SUBLUXATIONS, for they are all out of alignment and all FEEL like SUBLUXATIONS. SPINOGRAPH will reveal no difference between misalignment of vertebrae below and those above, for they are all out of alignment and all LOOK like SUBLUXATIONS. In all ordinary HUMAN tests, that vertebra which is out of alignment and is NOT a SUBLUXATION, and that vertebra which is out of alignment and IS a SUBLUXATION, remain the same. Only some means keenly different and more sensitive than our gross human range could detect with which one or ones THERE IS AN INTERFERENCE TO TRANSMISSION OF THAT SUBTLE MENTAL IMPULSE CURRENT GOING THRU. NCM detects THAT DIFFERENCE between vertebra below which is out of alignment, which does NOT interfere with transmission, and that vertebra above, which is out of alignment and DOES interfere with transmission. It is THAT difference which tells us WHERE TO ADJUST and where not to ("the adjustment with that extra something"); WHEN TO ADJUST and when not to ("the adjustment with that extra something").

If that be accepted as standard, then no SUBLUXATIONS occur below the atlas or axis. This statement is now made to correct the opinion we have held, that LOCATION of a possible SUBLUXATION could be as much in one part of spinal column as in other. That is now subject to amendment; majority occur above at atlas. We are now using SUBLUXATION in its correct Chiropractic understanding in contradistinction to term "misalignment" which occurs with as frequent regularity below axis as it ever has. In years past, we have been confusing misalignments of

vertebrae below for SUBLUXATIONS; but because we had not learned how to separate one from the other, or separate out facts that put one in one class, and the other in the other, we threw all in as SUBLUXATIONS.

Subluxations are of two kinds: those produced by a concussion of forces invading and resisting WITH VIOLENCE; and those produced by external forces such as heat (as in relaxation) cold (as in contractures) which either relax or contract muscles to point where a subluxation can permanently occur.

Up until this year, we have said there were three possible degrees of violence so far as its effecting body was concerned, especially in framework and structural continuity, viz., fractures, dislocations, and subluxations. TO THESE WE NOW ADD FOURTH: MISALIGNMENTS.

Until 1895, surgeons did not know man could have a vertebral SUBLUXATION without its being, in fact, a dislocation, a dislocation-fracture, or a fracture-dislocation. Since 1895, Chiropractic has taught that man could have a vertebral SUBLUXATION which was in fact less than a dislocation. Until last two years, we did not know we could have misalignment which was not in fact a SUBLUXATION; yet would have every such appearance by palpation, spinograph, and in moving value with hands as in an apparent "adjustment".

Up until a few months ago, it was generally believed you could locate A SUBLUXATION by palpation; with a spinograph; by the location of tender nerves; taut fibres; or contractured muscles. All of these can locate MISALIGNMENTS. In previous years we have construed any thing that we palpated that was out of alignment, which later was verified by spinograph; which had tender nerves, taut fibres, or contractured muscles, WAS A SUBLUXATION.

If facts justify conclusion that a SUBLUXATION at a superior point produces pressures upon nerve fibres, which have exits at inferior places in spinal column; that these superior pressures inflame nerve along its path even to its periphery; that this diminishment of mental impulse supply from superior interference, even down to point of exit from spinal column and on to its periphery; and this diminished supply of mental impulse current produces tender nerves wherever they can be traced, creates taut fibres wherever they can be located, and tends to prolapse or contracture muscles which they do not now supply, and thus bring about a MISALIGNMENT of an ALIGNED spinal column with its multiple segments, then it is obvious no amount of mechanical work

done upon MISALIGNMENT could do ought but temporarily REALIGN the segment or segments with same force and effect that any treatment would have upon any effect for the relationship between SUBLUXATION and MISALIGNMENT would be same as sick organ or viscus. MISALIGNMENT is an osseous symptom of a SUBLUXATION and any attempt at REALIGNMENT would be a TREATMENT upon effect and not an ADJUSTMENT of cause.

It should be equally obvious that tender nerves, no matter where traced, taut fibres no matter where located, and prolapsed or contractured muscles, irrespective of territory involved, are symptoms which cannot by themselves locate the SUBLUXATION or determine the place of ADJUSTMENT with any more degree of accuracy than could any symptom or group of symptoms in soft tissue organs or viscera. Symptoms, regardless of where located, in soft tissues or adjacent to bony structure, must be regarded as symptoms and as much or as little value placed upon them as they have always deserved.

A hypothetical case. NCM reveals eight places of peak heat readings. Palpation reveals eight places of deviations from correct alignment by palpation. Spinograph shows all eight are out of alignment. Tender nerves, taut fibres, and contractured muscles do exist at each of the eight places. In former days all eight were construed AS subluxations; eight places would be "adjusted." Were all eight SUBLUXATIONS? We thot so. Oftentimes, thinking makes a thing so, until it can be successfully contradicted or denied.

Today's construction in the SPECIFIC is that ONE of eight places IS a SUBLUXATION; other seven are MISALIGNMENTS. We can ADJUST A SUBLUXATION — not a misalignment. Misalignments can be realigned, but such realignment is NOT an ADJUSTMENT of ONE SUBLUXATION which will check out seven MISALIGNMENTS, given time, even tho nothing be done directly upon them. In this hypothetical case, ONE subluxation was ADJUSTED; seven misalignments would be realigned; seven tender nerves, seven taut fibres, and or seven contractured muscles will be restored. If given time, they will realign themselves without danger of creating SUBLUXATIONS in trying to realign them as misalignments.

Adjusting

New information brings forth new interpretations upon old conditions, thereby giving greater understanding of an improved service.

At first, "adjustment" was crude, bungling, push, pull, or shove. We heard them crack and pop. We thot, so long as we felt them move, patient felt them move, and we both heard them crack and pop, a good ADJUSTMENT had been given. Every deviation being a "subluxation", we popped, cracked, and shoved them all. Why omit any? "The more we shoved, the more patient was getting for his money. The more shoves, the quicker he would get well." It was one of our pet phrases: "If 'adjustments' don't do any good, they can't do any harm".

One first and original desire was to align spinous processes so they were in perfect alignment. We were one of those early unfortunates to be so experimented upon. Tips of our spinous processes are as straight as a plumb line, yet we have a double adaptative scoliosis as a result.

Spinograph eliminated much, confining us to "adjusting" only those which were "subluxations," which we thot we could see with eye. But even eye was not good enough. It could SEE misalignments and deviations but it could not SEE a subluxation.

Majors and minors corrected much of what remained. We would ask questions, get history, secure symptomatology and pathology, then deduct which set or group was most dangerous to present life of patient; again we deducted, trying to locate ITS subluxation, "adjust" that exclusive of all else. Every reduction in number of "subluxations" adjusted, stepped-up our percentage of results.

Then came the NCM with its evolution of technique, always stepping upward in interpretation by way of readings of comparative temperatures which indicated locations of nerve pressure mental impulse interferences.

Gradually this evolution has been gone thru, learning to ADJUST ONLY where there WAS interference to transmission. At first, under placement technique, we found many places. Under gliding technique, we now find ONE place of interference.

Today, less we do, if done right, more results we get. We have now learned that much damage has been done in the past by "adjusting" places that were not SUBLUXATED; creating traumas, producing SUBLUXATIONS. The new phrase is true: "If adjustments don't do any good, they can do harm".

If it were possibble to take the same case and follow it thru with two different Chiropractors, here is what could and has actually occurred.

(a) He makes pre-check, "adjustment", and post-check for one certain day. Case returns next day; same reading appears. Another

pre-check, same "adjustment" is given at same place in same direction; post-check shows that major and several, if not all minor readings are gone. Same action repeated day after day, READING REAPPEARING and same subluxeation READJUSTED, DAY AFTER DAY — a condition which might occur for several weeks or months, with never a complete continued checking out of readings. This frequently brings forth question: "When should we cease 'adjusting', assuming same readings consistently keep on reappearing, day after day?" Answer now is: notwithstanding daily "adjustment" daily check out readings, we doubt if there has been AN ADJUSTMENT given.

(b) Another Chiropractor makes pre-check, gives ADJUSTMENT ("the adjustment with that extra something"), and post-check shows readings are gone. Case appears next day and continues to reappear for many days, with no sign of a return of major and perhaps several or all minor readings. It proves that this IS an ADJUSTMENT ("the adjustment with that extra something") WHICH IS MAINTAINING ADJUSTED POSITION FOR A LONG DURATION — even unto a consistency for days or weeks ("the adjustment with that extra something").

In one instance we got a reduction of reading following ADJUSTMENT, but it returns sometime before next day. Who knows just when? Maybe within hour, maybe not for several hours, but fact that it is present NEXT DAY, proves it did return WITHIN 24 HOURS, sometime. In other instance, we get actual reduction of reading following ADJUSTMENT, BUT IT DOES NOT RETURN WITHIN NEXT 24 HOURS, nor does it return within next few days or several weeks proving there are ADJUSTMENTS ("the adjustment with that extra something") and "adjustments" — some that return and some that stick.

We began to find our ADJUSTMENTS were permitting readings to return daily; gradually time between began to lengthen. For a long time, we found our average was one ADJUSTMENT every five days, over a gross number of cases. We found we could give an ADJUSTMENT ("the adjustment with that extra something") that lengthened itself to where our average is 28.6 days before another was found necessary because of a return of SUBLUXATION.

In analyzing difference, let us suggest there IS a real, genuine, and tangible difference. NCM does not lie on facts. Difference is this: early return of readings indicates early return of SUBLUXATION, showing it was only PARTIALLY "adjusted", therefore did not remain permanently in situ. Prolonged check-out of readings indicates prolonged setment, showing it was more completely ADJUSTED ("the adjustment with that extra something") a PERMA-

NENT action, with PERMANENT restoration of position, with PERMANENT releasure of pressure and PERMANENT return of normal transmission, hastening materially marvelous return to health of otherwise dying people.

Cases will arise where, if there are multiple readings along spine, including major above as well as locals below, ADJUSTMENT of one above will GRADUALLY reduce that one, leaving all others more or less in status quo — neither increasing nor decreasing them, and this condition can run along for days. We might even finally get major out, leaving all others in the picture. We are convinced we are facing a definite working and practical practice principle, viz., inferior readings are the result of definite and exact pressures above, therefore all inferior readings are effects of a cause superior to themselves; therefore, given time, they will all check out. We have had many cases where inferior readings hung steady for several days or weeks, and then began to come down without attempt to realign local inferior misalignments. In time cases got well of everything they had without anything being done other than ADJUSTING major above.

Majority of Chiropractors work with concept that THEY are the all important feature of "adjusting subluxations"; it is what THEY do that replaces a SUBLUXATION; and with this thot, proceed to PUSH vertebrae into position THEY think they need be pushed into. "Adjusting", in their minds, means PUSHING BONES INTO ADJUSTED POSITIONS. We never have such a concept. To us, ADJUSTING a vertebra ("the adjustment with that extra something") is what happens AFTER hands have left back; it is that REACTION that occurs when INNATE recoils in body of patient, which resets vertebra into normal position. Our work is an enticement to get INNATE TO MAKE ADJUSTMENT ("the adjustment with that extra something"). Invariably when INNATE ADJUSTS SUBLUXATION it stays longer and readings remain absent longer and patient gets well quicker, and we can take more dangerous cases and get them well; where otherwise anything we did would have failed.

If you asked us to classify "adjustments" in ratio to value to sick, we would give five divisions:

1st. THE KISS "adjustment", where Chiropractor comes down lightly, indents skin, deliberately draws his hands away quickly, asks patient "Did it move?"; repeats this daily, prayerfully hoping his case gets well. Sooner or later, this man sets himself up as a standard on "limitations" of application of the Chiropractic principle.

2nd. A TREATMENT "adjustment", where Chiropractor stuns "subluxations," many of which he finds, jars them into a paralyzation. He is a hit-and-run adjuster; feels highly delighted with his work; wonders why his NCM goes up on the shelf; and installs radionics, etc. He becomes a mixer because he has found Chiropractic to be "limited" in practice.

3rd. A SHOVE-AND-A-PUSH "adjustment", where we want to feel something "move", want to hear something "crack", think WE know where IT ought to be put, and proceed to put it there. This Chiropractor wonders why his case gets better, gets worse, and might get well by accident; but leaves him up in the air as to what actually happened. He knows Chiropractic is right because it occasionally works.

4th. AN ADJUSTMENT, where we deliver a light, quick recoil concussion of force, letting Innate absorb and recoil in retaliation; knowing that Innate will ADJUST it to normal position where it belongs and will best stay for longest possible time. This Chiropractor works at location and position and with delivery by intention; checks and secures what he, as well as patient wants because all is done in cooperation WITH Innate rather than in opposition TO Innate. This Chiropractor is constantly and severely checking HIMSELF.

5th. Then there is that "ADJUSTMENT WITH THAT EXTRA SOMETHING", which has become a habit; he has arrived, attained; works deliberately, and knows how to secure that which he wants, day after day, on case after case. This man couldn't be side-tracked from Chiropractic if you gave him medical armamentarium.

There are "adjusters" AND adjusters; most of whom THINK they do, but most of whom DON'T. There are "adjusters" who kiss back; there are "adjusters" who shove and push bones from where they were to where they think they should go; and there are Chiropractic ADJUSTERS who have conceived true fact that THEY don't give an adjustment; that Innate alone, in body of patient, can recoil or snap vertebra into normal position. It has been said so often here that it is a standing joke, that we possess "uncanny skill" in locating interference and getting our sick well. Our sick are no different than YOUR sick; OUR NCM no different than YOUR NCM; our technique no different than yours — but there is ONE thing we do IN THE WAY WE DO IT, that is different than 99% of Chiropractors and that is our ADJUSTMENT ("the adjustment with that extra something.") If YOU will do exactly what we do, exactly as we do it, you can attain exactly

same results at home as we do here. If majority in our ranks had ability to give an ADJUSTMENT, there would be less alibiing, substituting adjuncts; more results; and Chiropractic would be a deliberate, tangible, asset.

If Chiropractor will work to secure an INNATE ADJUSTMENT ("the adjustment with that extra something"), utilizing his forces as an entree to get Innate to make ADJUSTMENT, he will find SUBLUXATION will stay ADJUSTED more permanently than before.

We hear comments about "giving a light adjustment for psychological effect"; or "I gave him a hard adjustment because he can stand hard ones." There is no such thing as a "light" or "hard" adjustment. There is, or there is not a necessity for AN ADJUSTMENT ("the adjustment with that extra something"). If there is, give AN ADJUSTMENT ("the adjustment with that extra something"); if there is not, do not give any. Any work, when none is needed, is unnecessary and anything unnecessary is dangerous. AN ADJUSTMENT is that which Innate will ADJUST itself to. If it needs violent jar to recoil vertebra into alignment, Innate will give it. If it needs "light" readjustment, Innate will perform it. These are questions Innate of patient can judge.

We are prone to think OURSELVES all-fired important, without which nothing can be done. WE think WE are the pumpkins and the IT of all health business. So WE say: "I cured her. It was MY treatments that got her well." We underestimate the value of Innate, and overstress importance of OURSELVES in doing anything.

At a recent state convention, we held a Chiropractic NCM clinic. A case was pre-checked; a Chiropractor "adjusted," and did not reduce readings. We ADJUSTED ("the adjustment with that extra something") the case and all checked out. Question was asked: "Would you call that an ADJUSTMENT?" My answer was: "I do not know. It might take several days to find out" — meaning, of course, that time would prove whether vertebra remained in proper position or not; and only time could prove.

Great and ultimate objective in all our work, study, concentration, application, palpation, graduation — is that when ADJUSTMENT is given, SUBLUXATION remains in normal position into which Innate recoils it. Any detail that helps to attain that end is not a detail, it is a vital issue and cannot afford to be overlooked as a matter of office procedure, no matter what it costs, how much it inconveniences, or what trouble it creates for you.

A patient enters; you give your pre-check; you find a high

enough reading on major to warrant giving an ADJUSTMENT. Having given ADJUSTMENT, you post-check; you find occlusion has been opened, pressure released, transmission restored — what is the next OBVIOUS thing to do? TO HELP IT STAY THERE AS LONG AS POSSIBLE. If it can be HELPED to stay in situ for six weeks, case will get well quicker than if it were NOT HELPED to stay there six hours. Is there, then, any detail which YOU AND PATIENT CAN DO, which will HELP it stay in normal position? Obviously! HAVE THE PATIENT LIE DOWN for a period following ADJUSTMENT. How long, may be a question. We have our cases rest three hours, flat on their backs, on a simple, plain couch.

We know the futile arguments against resting — patient hasn't time, or won't take it; you can't afford to rent room for that purpose alone; or you don't see the necessity for resting, etc. You CAN AFFORD TO do things which help attain that one essence of focalized and concentrated objective — SUBLUXATION remaining ADJUSTED.

Our cases come day after day. If readings are clear, they do not rest. If reading appears and an ADJUSTMENT ("the adjustment with that extra something") IS given, they MUST rest. No excuse can be offered by case, which permits us to withdraw that necessity; neither will we permit ourself to think any other condition vital enough to withdraw the rule from our office procedure. EVERY CASE THAT RECEIVES AN ADJUSTMENT ("the adjustment with that extra something") MUST REST!

What Will the Spinograph Now Show?

Spinograph shows hard tissue detail which can be read and interpreted to prove positions of contiguous organs. It is used by Chiropractor to produce bone shadows to study comparative positions of relative vertebrae, to ascertain correct and incorrect positions of vertebral subluxations and misalignments.

One of the common remarks amongst our profession is: "Why is it, when I find a 'subluxation' and adjust it for months, and then take another spinograph, I do not see any difference in position of vertebrae which compose that 'subluxation'?" That this is true is generally believed. Other cases show a "before and after" picture which proves corrected position of vertebra which was analyzed as SUBLUXATED. Many have had pictures which prove both contentions.

Many cases have come here sick; taken "adjustments," gotten well. We have taken spinographs before and after, and very little,

if any, change can be noted in position. We have had other cases come here sick, taken pictures, given ADJUSTMENTS; they get well; we take another picture and there is a marked change in the position of vertebrae.

What, then, IS this difference? Which of two types should EVERY case be?

If a subluxation IS a SUBLUXATION, then vertebra is out of normal relationship. If an adjustment IS an ADJUSTMENT, then vertebra must be restored to normal relationship. Some cases go to a Chiropractor — and don't get well. Some cases may go to another Chiropractor — and get well. Some cases get well by accident; others by intention. Some get well in spite of the Chiropractor; others because of him. Some get well without an NCM; others fail. What IS that fundamental? Can we decipher it, work for it, apply it knowingly? That some cases get well, with "subluxation" existing; and other cases get well with SUBLUXATION UNQUESTIONABLY GONE, proves that slightest release of pressure can accidentally get a case well, with our having no visual knowledge of correction of vertebra. It is safe to say that when an ADJUSTMENT ("the adjustment with that extra something") HAS been given, and vertebra HAS been restored from abnormal to normal position, as evidenced by spinographs of before and after; then case IS well, given time, and all else being equal. When an "adjustment" has been given and vertebra does not change from abnormal to normal position, as evidenced by spinographs of before and after, that case WOULD be well; would GET well; or would REMAIN well, notwithstanding he apparently seems so now.

What, then, IS this difference? In case where ADJUSTMENT ("the adjustment with that extra something") has been given of a subluxation revealed by spinograph, at a place located by NCM, which has proven a major, because of check-outs; AND THOSE READINGS REMAIN GONE FOR GREAT INTERVALS of time, in time THAT CHANGE WILL PROVE TO BE AN ADJUSTMENT, by Spinograph in correction of its position. But, in case where "adjustment" is given DAILY on a "subluxation" revealed by spinograph at a place located by NCM, which has proven to be a major because of check-outs; and those readings KEEP COMING BACK DAY AFTER DAY — necessitating a repeated daily "adjustment" — that change will NOT prove to be a permanent correction by Spinograph in position assumed by that vertebra.

Where ADJUSTMENT ("the adjustment with that extra something") is given AND IT REMAINS, then vertebra not only as-

sumes its normal position, from its abnormal, but stays there. Where "adjustment" is given, AND IT REAPPEARS DAILY, then vertebra has been merely JARRED FROM WHERE IT WAS, TO SOMEWHERE BETWEEN WHERE IT WAS to where it should be; but readily works back to where it was daily, and will not tend to stay. There is NOW a distinction to be made, even with visual spinographs of vertebral "subluxations," between ADJUSTMENTS that stay put and those that merely jar one from one position to another daily, only to work back to where it does not belong.

What is difference in what happened between a SUBLUXATION that is ADJUSTED and shows PERMANENT changed position by spinograph; and that case where you "adjust" for a long period, case seemingly gets well and shows no difference in position of vertebra by Spinograph? Difference is: in one instance you gave AN ADJUSTMENT ("the adjustment with that extra something") and in other you gave merely a SERIES OF JARRINGS which TEMPORARILY moved vertebra sufficient to produce a TEMPORARY improvement which is sufficiently marked to make case believe he is well.

There are several "systems" of how to adjust, peddled about country today, based upon idea of a series of tappings, jarrings, or a prolonged pressure upon vertebrae, notably three times tapping upon each vertebra, up one side and down other. Percussion hammer method is directly in point. It can be made to stimulate or inhibit heart action by vibrational tappings on vertebrae. Worst of all these methods is they do get immediate altho temporary changes in remote function which they construe to be a health return. It is not and cannot be permanent.

You give ADJUSTMENT ("the adjustment with that extra something") on Jan. 1st and do not find it necessary to give another before Feb. 1st (this interval is cited to act as example only), because of no recurrence of mal-position of that vertebra during interim, you have given an ADJUSTMENT ("the adjustment with that extra something"). If you give "adjustment" on Jan. 1st and find it necessary to give another "adjustment" DAILY until Feb. 1st (this time is cited to act as example only) because of daily recurrence of mal-position of that vertebra during daily intervals, we doubt very much if you have done anything but vibrated or jarred vertebra. As well use a vibrator or percussing hammer and gain same end.

At this juncture, before some misconstrue our position, we do not mean you must use a terrific wallop to give an ADJUSTMENT in contrast to a series of tappings to give an "adjustment" which is not one. One of these would defeat end as much as other. Value

of ADJUSTMENT is not to be measured by violence of quantity of force used, or by driving force that almost forces it thru body. Light application, directed with speed, securing that snappy recoil from Innate is what will accomplish AN ADJUSTMENT ("the adjustment with that extra something") whereas nothing else can.

Over-adjusting

There was a time in our history when we believed it was possible to OVER-ADJUST a subluxation. At that time, we believed SUBLUXATIONS could be ADJUSTED more frequently than was necessary; and thus, in some unaccountable way, we "over-adjusted" them. Today new concept enters. You can no more "over-adjust" than you could be honest, more honest, or most honest. If it IS a SUBLUXATION, it CAN BE ADJUSTED. If it IS ADJUSTED, it cannot be more ADJUSTED; therefore "over-adjusting" is a misnomer and is not correctly used, although presumably term will go on thru our annals.

If major reading is found at superior location, say atlas, and it is "adjusted" and post-check shows it has NOT reduced that on readings below, would ADJUSTING it again be considered "over-adjustment?"

What has happened in this case? An ADJUSTMENT was not given; therefore a second attempt is deemed advisable. We rarely find it necessary to try same place, in same way, twice. We GIVE AN ADJUSTMENT FIRST TIME. But, if you do miss first time, you MAY try second time; but we strongly advise against a third time or oftener than that. To do so means to "over-adjust" same place.

If we "adjust" whenever and wherever no interference exists, that is over-adjusting. Over-adjusting under such circumstances is creation of misalignments which indirectly affect one SUBLUXATION you are ADJUSTING. There is now a marked difference in terminology.

What to Do When a Case Has Been "Over-adjusted"

Over-adjusting means: (a) You have "adjusted" places other than major, which were not SUBLUXATIONS in fact. (b) You have "adjusted" major as well as other places, on days when they should have been let alone. (c) You have "adjusted" major SUBLUXATION, on days when readings were low, when it should have been let alone.

There is only one ADJUSTMENT for over-adjustment: under-adjustment, i.e., letting "subluxation" alone and reverting back to proper and correct procedure, viz., ADJUST only on major at such times as highness of reading justifies; that is, when it is two points or more and not always then, if readings ARE coming down daily without further "adjustment."

Why Is a Major Upper Cervical?

Tracings from X-rays are an example of what happens. Atlas or axis becomes subluxated, either between occiput and atlas, of atlas; or between atlas and axis, of axis. This adaptatively distorts position of head, not that position of head is a cause, nor is head subluxated upon atlas or axis, but that upper portion of cervical region is subluxated between segments above or below.

Adjustment of one subluxated vertebra realigns occiput, atlas and axis into correct alignment, and this in turn releases pressures and interferences and restores transmission between Innate and Educated brains, which in its turn releases congestion above and interference below in a multiple interference commonly known as cord pressure. We thus do TWO things: 1st, restore normal function to thinking brain above; 2nd, restore function to working body below — two VERY important things in proper working health of body, both mentally and physically.

There is another system of "adjusting" being peddled today, having no direct merit within itself, yet accidentally and occasionally accomplishing a desired result, viz., so-called adjusting of subluxations of craniobrae, or supposed-to-be movable segments of skull. By "adjusting" effect — the skull — occasionally an atlas or axis may be accidentally ADJUSTED, or more frequently could produce more than it reduced, same as treating effected pelvis could and might accidentally and occasionally "adjust" a lumbar "subluxation." By indirection and accidentally direct result might take place.

To ascertain frequency of SUBLUXATIONS, comparatively, 500 X-ray plates were studied and analyzed with following result:

1. Occiput-inferior on left-1
2. Occiput irregular-low on right-22
3. Occiput irregular-low on left-48
4. Head tipped right-43
5. Head tipped left-32
6. Atlas right-71

7. Atlas left-39
8. Atlas right and inferior on right-46
9. Atlas left and inferior on left-12
10. Atlas right and superior on right-2
11. Atlas inferior on right-13
12. Atlas inferior on left-12
13. Axis-right-75
14. Axis-left-61
15. Axis right and superior on right-4
16. Axis right and superior on left-1
17. Axis left and superior on left-4
18. Axis-inferior on left-1
19. Axis-inferior on right-1
20. Axis superior on left-3
21. Axis superior on right-3
22. Axis left-Atlas left-7
23. Axis right-Atlas right-21
24. Axis right-Atlas left-24
25. Axis left and Atlas right-25
26. Axis right of Atlas-7
27. Axis left of Atlas-superior on left-3
28. 3rd cervical-right-17
29. 3rd cervical-left-14
30. 3rd cervical left of axis-1
31. 3rd cervical superior on left-1
32. No listing-60

Listings marked "irregular occiput" are those where occiput is not bilaterally symmetrical, therefore gives appearance of being a tilted head, yet in reality is not.

On those listed "head tipped" right or left there is actually a tipping of head but in nearly all of these there is actually a tipping of at least part of cervical vertebrae with SUBLUXATION of one vertebra. There are a very few tippings of head alone, probably not more than ten cases out of 500 represented.

Under head "no listing" are those cases where so far as laterality is concerned, none could be detected of atlas or axis.

Why Inferior Readings Are Sometimes Slow to Read Out Permanently

Information of INTERNAL nature, beyond observation, understanding, knowledge, or ascertaining of man, must be worked out on logic of EXTERNAL evidence which justifies facts; working from known to unknown. Clinical observation takes precedence when based on evidence.

External evidence justifies conclusion we have a SPECIFIC SUBLUXATION, which upon ADJUSTMENT checks out all inferior readings, even permanently, and health is permanently restored to many places below, in many organs located at remote places in soft tissues. This proves MULTIPLE interferences. One superior SUBLUXATION can and will produce pressure upon MANY nerve fibres passing thru spinal cord, interfering with mental impulse supply going thru many fibres passing THRU that structure and obstruction hence affecting function at MANY inferior locations. This is cord pressure.

First thing that happens immediately following ACUTE vertebral SUBLUXATION is inflammatory process as a result of interference to transmission at point of immediate pressure. Inflammation produces swelling. Swelling extends outward, in spinal canal, to extent of floating space. When that space is crowded, swelling returns towards center INTO spinal canal and now we have cord pressure upon many fibres. As a CHRONIC pathology, there is SCAR TISSUE formed at a place or places in or upon cord at place or places of pressure to protect it from further encroachment.

It has long been one of our conclusions that "infantile paralysis" is a mixed and complexed aggregation of symptoms and pathology; therefore it is hard to set any fast and set symptoms or pathology, except when chronic there is a paralysis and depletion of tissue. This is because cord pressure can vary as to superior or inferior location and quantity of fibres under pressure, going to various localities, which vary greatly in individuals. Chronic nature and slow recovery of cases is based more on dissolution of SCAR TISSUE than upon symptoms themselves, cord pressure, or ADJUSTMENT of SUBLUXATIONS.

SCAR TISSUE in, upon, or around spinal cord, is to spinal cord what CALLOUS is to a corn; EXOSTOSIS is to pathological or degenerated bones; ADHESIONS are to soft tissue; OSSEOUS SYMPHYSIS is to fracture, viz., a natural adaptation to a pathological condition, to support, to protect, to prevent its getting worse. It becomes a protecting tissue brace. Scar tissue, callous, exotosis, or adhesions will occur when tissue needs a natural protector to an unnatural condition.

A case has eight readings — one major in superior cervical, other seven distributed somewhere along spine at inferior points. We ADJUST major. Its local intervertebral foramina spinal nerve pressures reduce rapidly and permanently fade out of picture. Inferior readings fluctuate some, either lower or higher, but from day to day do not check out with any marked degree, neither do they pass out within a few weeks. What happens when these inferior readings are slow to pass out? Are they separate SUBLUXATIONS? Are they "SECOND majors" to be ADJUSTED at some later time?

To ADJUST major is easy. If it can be ascertained we do, by that ADJUSTMENT, fluctuate readings below, either way, even in minor degree, we are satisfied they are due to cord pressure above. Given time, they will fade out of picture. Why must we wait? SCAR TISSUE ABOVE MUST BE TORN DOWN AND THAT WILL TAKE TIME. As soon as SCAR TISSUE is resorbed by Innate, mental impulse will get thru normally. Recovery will be in ratio.

You might ADJUST SUBLUXATION in one day. It might take two months for SCAR TISSUE to be taken from around spinal cord, before mental impulse normal supply COULD GET THRU or before reduction in heat readings might be restored to normal heat reading. We should be slow to jump to conclusion that because inferior readings don't hurriedly respond to adjustment above, they are secondary SUBLUXATIONS and therefore should be ADJUSTED within a few days or first two or three weeks, etc.

(By way of interjection: each article has aimed to cover one subject. The value of ONE subject must be linked and coupled with another to get combined value in study of any case. We hope our readers will bear that in mind. Ed.)

Percentage Tests

Chiropractic principle is sound. Its practice may be unsound. To prove that principle is sound and practice is unsound, was objective in taking cases on working tests, to see where we arrived.

Chiropractic is premised upon principle that

- a vertebral SUBLUXATION occludes foramen
- occluded foramen produces pressures upon nerves
- pressures upon nerves introduce interference to transmission
- interference to transmission offers resistance to transmission
- resistance to transmission creates additional local heat
- diminishment of transmission represents dis-ease at periphery of those nerves

- therefore, a thermo-couple hook-up, reading absence of an excess of local heat, would prove ADJUSTMENT was properly given
- therefore DOES correct CAUSE of that dis-ease.

With these working principles and practices sound, logical, we decided to take cases and work out percentages of pre-checks and post-checks, using four different methods of "adjusting" to compare and to prove which ones accomplished Chiropractic practice objective, to prove whether principle was sound in them and prove WHICH METHOD of practice best got cases well.

Case "A" was checked and ADJUSTED according to very latest, approved SPECIFIC method. Adjuster checked his work daily, both before and after each ADJUSTMENT, to see if readings were increased or decreased, and where.

Case "B" was checked according to latest NCM technique. "Adjusting" was done according to meric system, based on symptomatology given by case, diagnosis recorded, a physical examination made by competent physician. Spinographs were taken, read, and "adjustments" given according to them; reproducing condition existing prior to advent of NCM in 1923. Only thing additional to previous-to-1923 days was use of NCM No. 2 for purposes of checking, proving, and making comparisons of systems involved.

Case "C" was checked according to latest NCM technique. "Adjusting" was done according to three times up one side, and three times down other, tapping every vertebra in spinal column. This method need not depend upon meric system for, being a shot-gun method, nothing can be missed — there being no attempt at anything specific as to place, direction, or results. Neither is this method based on symptomatology, pathology, physical diagnosis, etc. Only value of securing any of this would be to inquire later from case what has or has not disappeared; become better or worse. Certain schools today teach this hit-'em-all system, and some practitioners still use it, feeling "if it can't do any good, it won't do any harm" — a supposition without proof. It is that proof which we desired to find to see whether conclusion was sound or unsound.

It is understood that in cases "B" and "C" adjusters did not have access to NCM records; they did not know what it showed or didn't show. Cases were read before "adjustments" were given, in a room different than adjuster "adjusted" in, as were checks afterward. Adjuster was given no knowledge of what he did except as he gained information from his patient in changed symptomatology. To make the test, the conditions were ante-dated, back previous to 1923, as

conditions existed then, when we did not have access to an NCM or what it revealed.

There was a difference in three cases. This could not be avoided. Ideal would have been to have had three cases EXACTLY alike, but this was impossible in three different bodies. Three average cases with chronic conditions were picked. Three slips of different length were cut; three adjusters pulling slips, drawing their cases. In this way, three cases were distributed to three adjusters.

Patients Are No Standard

Many times patients come into an office — those who understand and know Chiropractic, especially Chiropractors who have been our patients — who, under ADJUSTMENT day after day, state they are certain there WILL BE a reading at a certain and stated place, where we have previously found a reading. We check — and no reading, either local or major. On other days, same case will tell us he feels rotten — all upset, and is certain readings will show that day, based upon how he feels; and many times there is no reading, local or major, and frequently no reading anywhere.

How is it, then, we can and do have “symptoms” in local or general readings in spine to merically correspond? Answer is simple! If there are NO readings, then there are NO readings and no ADJUSTMENT will be given at such time when there are no readings present on major.

“Pain is a mental interpretation of an external abnormal physical condition” — meaning that mind will INTERPRET IMPRESSION that comes from external area, and will always interpret it according to what that external condition is. If it is physically or functionally abnormal, mental interpretation will correspond. So long as individual is sick, interpretation corresponds.

Suppose a case comes with six readings, all are result of ONE major. This case has six diseases in six different organs or viscera corresponding to six different nerves distributing to six different areas. Suppose those six abnormal transmissions of QUANTITY of mental impulses produce six different qualities of interpretations at periphery, then he will have six different QUANTITIES of interpretations of feeling at mind in brain. Suppose, on FIRST day, we give ONE ADJUSTMENT (“the adjustment with that extra something”) on major in that case, release ALL interferences, restore transmission to ALL six places, and it remains fixed; — what would happen so far as feeling is concerned in that person's mind? Interpretation would continue to correspond, up and down scale, AS HIS BODY CHANGED from abnormal QUANTITY to nor-

mal; from abnormal QUALITY of function to normal QUALITY of sense of feeling. Some days will be better; others worse. His sense of feeling will fluctuate in ratio as function is changing. So it is not unusual that patient should some days complain of feeling as tho there were a reading, when SUBLUXATION does NOT exist, transmission IS getting thru, there are NO readings, and therefore there is NOTHING to "adjust."

If we permit symptomatology of patients to act as guide as to when and where we "adjust," we will get back to old form of "adjusting" and treating anything and everything, everywhere, all the time, and destroy very thing patient is demanding and paying for. It takes courage to resist invading force of demands of sick; it takes conviction on part of Chiropractor to know what he knows, to see what he sees, and to resist doing things judgment advises him not to do.

Before and After Check-outs — Then What?

Problem:

"Calbro Magno Wave gave low general tissue resistance, localizing desiccation over tonsillar, gall bladder and arm dermamer, i.e., according to their geographical area. Calbro Magno Wave spinal analysis localized neurological findings over second and fifteenth vertemere. NCM gliding technic had been used prior to the Calbro Magno Wave with major Ax. 3L, very gratifying results, whenever having attacks. Sundays, March 8, NCM finding was Ax. 2L, 8th D 4R, 12th D 1L. I know these are permanent readings. I suggested to operator that no adjustment be given, but to go ahead with his treatment, with Quantameter. Metal discs were adjusted as to localized areas affected. For instance, tonsil was considered major. Disc was placed over tonsillar areas, and another disc placed over upper cervical spinal area. Instrument was turned on. Treatment five minutes. Pre-checked with diagnostic instrument, showing slight raise in tissue response. Throat symptoms not so scratchy. Here following was a revelation. I made a NCM check, and my case checked out with exception that axis, was 1L. All other readings were out of picture.

"That information is most damaging to Chiropractic, if it is once imparted to the field — 'that even a NCM check, and finding can be reduced without ever laying a hand to adjust patient.' It raises question again, does disease create nerve interference, or does interference to transmission of M.I., primarily cause disease in tissue?

"Is this instrument going to force into discard Mechanical Adjustic application of force?

"In my opinion, unless greater research with the NCM is put into action, it will do that very thing."

Does it prove that,

- because morphine is given in arthritis and pain subsides, arthritis is cured?
- because a nerve is sectioned in tic, and tic subsides, the case is cured?
- because salts are given in constipation, and bowels move, constipation is cured?
- because a clinical thermometer finds an abnormal temperature, ice packs are applied and temperature reduces to normal or sub-normal, fever is cured?
- because a vibrator, percussor, stretching machine are used, and pre-checks are post-checked out, WITHOUT the giving of an adjustment, and ADJUSTMENT HAS been given and case cured?
- because a pre-check shows readings, a radionic treatment is given, readings are checked out or reduced, the case is well or is getting so, even if repeatedly found to be true under repeated tests?

It proves what it proves — that treatments DO give relief; that morphine DOES deaden pain; that a sectioned nerve RELIEVES tic; that bowels MOVE salts; that ice WILL stimulate or inhibit muscular contractility and TEMPORARILY inhibit a stimulation or TEMPORARILY inhibit that which was stimulated. That is old; it is NOT new; that is principle and practice of medicine and has been for 5,000 years.

That is as far as medicine has gotten, after 5,000 years — to do those things in those ways, at those places, TO OFFER RELIEF or palliation to HEAR OR CURE disease. They give morphine, ask patient if pain has subsided; he admits it has. They section the nerve, ask patient if relieved; he reports he is. They give salts, ask patient if his bowels moved; he reports they did. They apply ice packs, ice tub baths in fevers and hot water bottles and baths in chills; they use clinical thermometer, record difference between what it was and now is, show it to patient who is pleased. They take urine, prove sugar contents, put the patient on a starvation diet; again test urine and less sugar. They show decrease. Medical objectives sought have been medically attained! Doctor admits an improvement in case.

Medical men have been satisfied to RELIEVE symptoms. They

reach THEIR objective when they PROVE relief by physical demonstration. Some Chiropractors are of same mind. If medical men, in early days, had known importance of spinal column, nervous system to function; and distribution of nerves from brain to back, to body, they would have applied more treatments TO BACK AND LESS TO BELLY; they would now offer more proof via back and less via belly. Give some "Chiropractors" time, and they'll do what medical men want done, for them. They'll "limit" Chiropractic, via back; expand medicine, via back.

It proves what it proves — there ARE methods of treatment where a change CAN BE MADE to appear, visualized by optical proof, temporary in nature, externally applied which internally did RELIEVE a TEMPORARY change, which was artificially produced and none of which was a natural, normal, or PERMANENT method of restoring health. It proves there are methods directly applied which indirectly affect releasures of pressures and TEMPORARY restorations of transmissions of mental impulses; and we, with NCM can produce visual proof that sustains it — but IS THAT THE CHIROPRACTIC OBJECTIVE DEMANDED TO GET SICK PEOPLE WELL? As he can apply thermometer, in mouth, and prove fever has been reduced as a result of an ice-pack on back of neck, so can we pre-check and post-check and prove that interference-heat-readings have been reduced as a result of backbone stretching device but is that ALL WE demand, as Chiropractors?

If we were to practice medicine, using its methods and means, with its principles and practices; KNOWING WHAT WE DO ABOUT CHIROPRACTIC, using its methods and means, understanding its principles and practices, WE WOULD WORK ENTIRELY UPON THE BACK.

Much, if not all, of RELIEF given cases is secured that way. Treatment is of such character as applied, that it HAS an effect that in reality DOES relax or inhibit musculature to extent that it does TEMPORARILY release pressure and restore transmission, and case secures ease and relief. Much, if not all, of RELIEF given by some "Chiropractors" (?) is secured that way. Effect of their "adjustments" produces same effect upon spinal segments as a vibrator or percussor, stretching machine, hot water bag, ice bag, or what have you. When they fail to get PERMANENT releasures, PERMANENT restorations, PERMANENT health, they think of "adjustment" in terms of "limitations" same as they do of medical treatments, viz., it gives TEMPORARY RELIEF. No wonder they think Chiropractic a "limited" method. No wonder many look at work and works of one who GIVES ADJUSTMENTS and calls him "an uncanny worker" with "an uncanny mind,"

which ferrets thru cases with "uncanny skill," none of which is true. There IS a difference between "treatment-adjustment" and ADJUSTMENT-ADJUSTMENT. When ANY CHIROPRACTOR reaches that stage in his art where he can and does give ADJUSTMENT-ADJUSTMENTS, he too will be another "uncanny" worker and realize Chiropractic has no "limitations"; but there are MANY "limitations" in MANY "Chiropractors."

A patient enters with eight places of readings between atlas and coccyx. The Chiropractor "adjusts" and checks out superior few. He does not check out inferior few, according to his statement. He reverts to a coccygeal "adjustment" and inferior few check out. All return daily, day after day. Should he ADJUST both atlas which checks out superior, and coccyx, which checks out inferior ones?

Suppose this same case comes. You pre-check entire length of spine. You find eight places of readings. You do NOT give an ADJUSTMENT. Suppose you place a hot water bottle on cervical region and cold pack over coccyx. In half hour, you post-check and find all readings "checked" out. What happened? You relaxed superior pressure and inhibited inferior readings. Does that prove that A VERTEBRAL ADJUSTMENT has been given and PERMANENT pressure released and PERMANENT restoration created?

Suppose you do nothing more by means of relaxation or inhibition at either end; neither do you give ADJUSTMENT but you pre-check daily for one week. What will you find?

Same regularity of eight places of readings, because vertebral SUBLUXATION still persists in existing, because it has NOT been ADJUSTED.

We took this case, gave a pre-check reading: found eight places of readings; gave an atlas ADJUSTMENT ("the adjustment with that extra something") THAT WAS; post-checked; found ALL readings checked out. Daily checks for nine days showed NO READINGS at any of eight places. Case received nothing but atlas ADJUSTMENTS ("the adjustment with that extra something"), whenever interference was present, and case went home well.

Previous to this experiment, case had had baths galore; over \$4,000 had been spent trailing those elusive readings and trying to get them out of picture by any and every other means.

A situation like this could occur. We have a superior reading, which, when ADJUSTED checks out inferior readings at one other place. "ADJUSTING" inferior reading will check out supe-

rior reading. What happens is that superior location IS a subluxation and it HAS BEEN ADJUSTED. As a result of ADJUSTMENT upon SUBLUXATION, it does check itself as well as inferior one. Inferior reading being misalignment, anything done upon it is merely a realignment of a misalignment BUT NO ADJUSTMENT HAS BEEN GIVEN TO lower area; therefore, whatever change takes place in this lower instance would be temporary.

We took a series of test cases, this spring, to bring forth that information.

We found in majority of inferior heat readings, construing those places as misalignments, we could "adjust" them and they would frequently reduce readings above at major which WAS THE SUBLUXATION; but they would always return before next day, showing WE COULD NOT KEEP THEM OUT as would be necessary with ADJUSTMENT of a SUBLUXATION, but that we did reduce them by relieving them, as any other form of treatment might do upon an effect. In this way we would get temporary relief by realigning misalignments but we could get PERMANENT releasure by adjusting THE SUBLUXATION.

Was an ADJUSTMENT given, because readings had disappeared? Or was an ADJUSTMENT given and readings disappeared permanently and case got well?

Solution:

A PERMANENT subluxation produces a PERMANENT occlusion.

A PERMANENT occlusion produces a PERMANENT pressure.

A PERMANENT pressure produces a PERMANENT interference.

A PERMANENT interference produces a PERMANENT resistance.

A PERMANENT resistance produces a PERMANENT disease.

An average patient has changed from one kind of doctor to another and tried anything and everything for years. He has been doped, treated in many ways, and IN THOUSANDS OF INSTANCES HAS RECEIVED TEMPORARY RELIEF.

Many methods TEMPORARILY relax, such as heat, vibrations, massage, hypnotic drugs, anesthesia, whiskey, sleep, etc. Why name or enumerate all? TEMPORARY relaxation means TEMPORARY releasure of pressure, TEMPORARY restoration of transmission, and TEMPORARY relief. That has been going on for centuries, on millions of people. There is nothing new in it.

WHAT PATIENT WANTS IS TO GET WELL—PERMANENTLY. That created necessity for CHIROPRACTIC. It is only principle or method that does PERMANENTLY release cause and PERMANENTLY restore health.

Now comes radionic treatment. It TEMPORARILY relieves. Why go into it? It's the same story! Put a hot water bottle on neck; check, and break reading is gone. Let individual sleep, wake up, check and PERMANENT reading is TEMPORARILY gone. What of it? It is not PERMANENTLY gone, and won't be until SUBLUXATION IS ADJUSTED.

There is coming into picture new interpretations upon old subjects. Allaying, deadening pain is not restoring normal feeling. Alleviating symptoms does not cure patient. Operating upon and removing growths is not healing ills. We have cases of paraplegia or hemiplegia. Under SPECIFIC ADJUSTING ("the adjustment with that extra something"), pain materially increased—in fact at times became unbearable. Each case was kept awake at night. They wanted to sleep—something to "relieve the pain and to cause sleep." Would we permit it? NO! We were working for increased rapid flow of mental impulses to continuously flow into paralyzed parts. The SPECIFIC ADJUSTMENT ("the adjustment with that extra something") kept mental impulses flowing as long as seven days at a stretch; never stopping them with created traumatism, but increasing them with one ADJUSTMENT that permanently held. We could permit morphine which would "relieve" pain and cause sleep; but what were we giving ADJUSTMENTS ("the adjustment with that extra something") for? TO GET THEM WELL! Morphine would have counteracted the thing we were doing.

There is coming into picture new interpretations upon old subjects. There was a time when we were glad to digitally palpate for and find "subluxations." NCM has taken us out of that realm. IT finds them. There was a time when we were delighted to punch any hill, valley, irregularity, or misalignment and call all "subluxations." NCM has taught us a SUBLUXATION is something more, and less, than those, and WHEN NOT TO ADJUST is more important than when to. There was a time, and it wasn't long ago, when we thought sole objective was to use NCM and be glad we had attained when the reading checked out a few minutes after. We found various treatments TEMPORARILY do that without an ADJUSTMENT. Today we understand that thing desired is to so ADJUST major ("the adjustment with that extra something") as to release pressures, restore transmissions and KEEP

THEM FOR DAYS OR WEEKS without further damaging interference upon our parts.

**The Accumulative Value of a Series of Daily Readings
of the Same Case**

In early days, we palpated misalignments and called them "subluxations." In those days, we thought any continued series of pushes or shoves on supposed-to-be "subluxations," given time, would get case well.

It did not take any Chiropractor long, once he entered the field, to discover that what he had been taught did not ALWAYS work. Occasionally they did, but because of uncertainty of the plan, HE DID NOT KNOW WHERE, WHEN, OR HOW. When unexpected happened, his hopes raised. When expected failed, his hopes were dashed. Because expected failed more often than unexpected happened, he soon began to doubt efficacy of all he was taught, both in principle and practice; began to seek other and greener fields, even if they were old hay in the hay-mow of yesterday.

Today, with NCM, we located WHERE actual interferences to transmission are. This establishes IN FACT that which we believed IN THEORY, yesterday. Today, with spinograph, we know POSITION of subluxation at exact LOCATION of interference. This establishes IN FACT that which we believed IN THEORY yesterday.

Today, with NCM, we know necessity exists for ADJUSTMENT; WHEN ADJUSTMENT is needed or not needed; and thus prevent ourselves producing traumatisms and "subluxations" or increasing pressures and consequent interferences. Today, with NCM, should we fail, we have a definite and positive record which we can analyze, interpret, and understand WHY.

Accumulative value of a series of daily pre and post check readings of case is of untold value to a Chiropractor. It reveals whether case HAS OR HAS NOT a major; whether HE IS OR IS NOT giving an ADJUSTMENT ("the adjustment with that extra something"); whether his case IS OR IS NOT getting well. Too much stress cannot be placed upon building a record of every case—studying that record; reviewing if in doubt; for it always reveals what is right or wrong.

These statements are premised upon unquestioned integrity of Chiropractor making readings; assuming he is using a NCM correctly; watching and checking himself on technique; giving Innate ADJUSTMENTS ("the adjustment with that extra something");

and is sincere in delivery of service to sick. If opposite is true, record reveals it all, as well.

If Chiropractor presumes he knows more than his instrument, or his mind knows better what is right than his instrument reveals is wrong; or if he neglects to study his check readings, all work done is of no avail for he finds his mind in a haze, conclusions in doubt; results in chaos and business where it was before he secured a NCM.

1950 Chiropractic is a very EXACTING task-master as compared to the slip-slod, careless, indifferent, hope-to-hit-it-right method of years back. Getting sick well NOW is a matter of science. Science excuses none from meeting its tedious demands, all of which are simple, once habit is formed and observation keenly correct.

GETTING SICK WELL IS THE EASIEST THING TO DO NOW. Hardest work is to keep from making them worse; creating SUBLUXATIONS; producing traumatisms and consequent interferences. Other things being equal, TO GET SICK WELL IS A SIMPLE MATTER OF BEING A CHIROPRACTOR AND FOLLOWING SIMPLE CHIROPRACTIC RULES. Reason Chiropractor has failed on many cases was not because he COULD NOT get them well, but BECAUSE HE LABORED LONG AND STRONG TO MAKE THEM WORSE; he put himself out to do so much in so many places and in so many ways he defeated purpose he was in business for, and why they came to him. He "adjusted" majority of cases sick, by "adjusting" too many "subluxations" too often denying cases what they came to buy which Chiropractic was capable of delivering.

Truth Is Stranger Than Fiction

Sick people come to a Chiropractor, take Chiropractic ADJUSTMENTS, get well, and not know they are well when they are.

One man was near-sighted. He took ADJUSTMENTS. He soon did not need glasses. He did not know that he had laid them aside and had not used them for six months. One day his assistant called his attention to it. He did not then remember the day, hour, or place when he HAD laid them aside.

Many cases get well so gradually that, living so close to themselves, they do not know it. Another person will notice improvement quicker, more pronounced, at intervals, than case will. We could recite case after case where we have observed definite and positive changes taking place; asked case how she was getting along: "No better, I see no change." Then we mentioned certain

facts. Case would be surprised, acknowledging conclusion correct.

We recall a case of paralysis agitans. We mentioned, one day, that we thot shaking of right hand was less. She denied it. We said nothing more, but watched right leg. Every day that case came, we watched right leg. After two weeks, satisfying ourself that right leg did not shake AT ALL, we asked her how her right leg was, and she affirmed that "it is the same, no better." We told her. She was surprised and had to remember back that there was a time when it did shake ALL THE TIME and now it did not shake AT ALL. Then she admitted she was better.

We Do Not Feel Normal Feelings

It is only abnormal, such as pain, we feel. Normal contractions and relaxations of muscles come and go without notice. It is when muscles jerk, twitch, out of time and out of place, we observe them. We have constipation and know it. Let muscles contract and relax normally and it is so natural we pay no attention to it. We see and observe a cancer grow. We suffer when we cannot eat and digest. We do not observe thot. If bowels move normally, what of it? Let skin get discolored and we see it. If muscles jerk, we know it. If bowels don't move, we talk about it.

Let that patient go to a Chiropractor, take ADJUSTMENTS, and in exact ratio as anything wrong goes back to normal, in that same ratio patient loses cognizance of that change. Let a headache pass out and normal feeling pass in, patient loses consciousness of pain and does not become cognizant of returned normal feeling. Tomorrow when headache has gone, ask where headache is, and he is surprised to realize it IS gone. Same is true of any sickness or dis-ease.

Patient lives so close to himself he is not aware and cannot be, by very nature of internal workings of his own feelings, whether he is getting better or worse. It behooves you, who see case daily, to observe changes and tell patient, providing you are interested in that side of case.

Prognosis

Prognosis is frequently considered vital, even by Chiropractors. Let us cite two cases of how that can be done, with a greater degree of accuracy NOW than by medical methods or by methods other than use of NCM.

The FHN of May, 1931, contained an article "THE DAY OF SCIENTIFIC CHIROPRACTIC IS HERE." It bore directly on prognosis. A case took adjustments for tuberculosis, for 11 days.

Most of his acute symptoms had subsided, yet "there still remained a heat reading of ten points on right third dorsal spinal nerve, according to NCM." Case thought he was well. Parents thought he was well, and were skeptical when Chiropractor told them he should NOT stop. Case quit. Case went to a medical physician who gave him usual chest physical examination, and pronounced him well. He went to a second physician who repeated examination and pronounced case well. Case was advised by Chiropractor NOT to quit, that he was NOT well, and conditions WOULD return as CAUSE still existed. Later, case died, as a direct result of continued SUBLUXATION. Who correctly prognosed that case — Chiropractor with NCM findings or physician with chest physical examinations — one from back, other from belly?

One of our cases began taking ADJUSTMENTS in private clinic March 2, 1931. Between that time and June 16th, case had six ADJUSTMENTS on axis alone in fourteen weeks, or an average of one in slightly less than every two weeks. They kept reading low, and gradually getting lower. June 16th, the case came in reporting he was feeling fine. Axis reading showed eight points left — highest it had been. Suppose he had not been ADJUSTED on that day, and it had been permitted to run from that acute high reading on major SUBLUXATION; what would have developed? We haven't any more idea than you; something would have developed, there is no doubt. It was ADJUSTED ("the adjustment with that extra something"), checked, stayed out for two weeks more. What was PROGNOSIS of that case? There were no symptoms or pathology to prognose. It was checked before they arrived or developed. To have him come THAT day was to adjust THEN before anything developed. He was feeling fine. How would he have felt a week later? When you ADJUST ("the adjustment with that extra something") shortly after causation of SUBLUXATION, at place and in way needed, you check even an acute disease before it becomes acute.

CHECK READINGS ARE BEST PROGNOSING METHOD AT OUR COMMAND. If feeling well, and readings still exist, he is sick and not well. If feeling well, and readings exist, he would have been sick if not ADJUSTED.

Quick and Slow Cases — What Predetermines?

If all facts were known, cases would divide themselves into three groups:

1st. FUNCTIONAL. Under this group are cases which have an excess or lack of transmission with attendant physical or physiological disorder. Many so-called organic conditions come under

this classification. Under ADJUSTMENT ("the adjustment with that extra something") this group will get well so quickly they may be classed as miracles.

2nd. SEMI-FUNCTIONAL. Under this group are cases which have a physical or organic condition which, altho based on a functional interference, have a genuine type of mild organic dis-ease. There would be a difference between a vertebral SUBLUXATION interference producing contractured muscles, in an ACUTE stage (which would put it in 1st classification) and same case that had been chronic for years (which would put it in 2nd classification and yet not put it in third classification). Some of these cases would respond as miracles, and some would not — according to degree of acuteness or chronicity.

3rd. ORGANIC. Under this group are cases which have a marked chronic physical disorganization or disintegration, such as cancers, tumors, paralyses with depletion, indigestion where structural change has become chronic. These cases would take time to get well. By time, NOW, is not meant years, but under SPECIFIC, months, by comparison to what it used to be previously.

Where mental impulse DOES get thru, and has little if any rebuilding of structure, time will be short for complete recovery. If there is much rebuilding, such as in cancer, time is an essential considered by Innate before she will dismiss case well.

WHO is competent to say whether any or every case is functional or organic? Some are apparent and obvious. Majority are not. We have had cases which we believed organic, only to get well in a short time — which proved them functional. We have had other cases which we thot were functional, but it took months before they were well, which proved them organic. We know of no person, with any known diagnostic method, who can prove existing disease functional or organic; and upon that turns question of recovery of health so far as time with healing of DISEASE is concerned.

A Present and Future Danger

We see grave danger creeping into our future picture. No matter what scientific achievement is competently made, it is immediately surrounded with dangerous possibilities by subterfuges, evasions, and deliberate financial chicanery.

SPECIFIC is a system of finding THE subluxations, which by location is creating other misalignments, thus affecting various and many portions of body by various kinds of multiplicity of symptoms and pathologies; which by Innate ADJUSTMENT ("the adjust-

ment with that extra something") of ONE place corrects ALL in short time.

SPECIFIC has been tried now for approximately thirty years by us here and by field in growing numbers. It has worked in many thousands of cases. Number using SPECIFIC is growing, as its achievements become better known and its followers perfect themselves in understanding it.

SPECIFIC subluxations can be located at atlas or axis. SPECIFIC ADJUSTMENT ("the adjustment with that extra something") would be located where that SPECIFIC subluxation is. SPECIFIC subluxations and ADJUSTMENTS are located in either atlas or axis. That being true, it would not be surprising to find "Chiropractors" who automatically "take a crack at atlas or axis" as a factor of safety so they couldn't miss getting one or other of right places in all their cases. In that action lies our greatest future danger.

How is ANY practitioner to KNOW, without an NCM, whether IT IS atlas or axis? How is he TO KNOW, without an NCM, which is necessary way to ADJUST either one in their nine possible constant or variable positions to restore transmission? What is to hinder him from producing a greater subluxation than formerly existed, increasing resistance, and making case worse? Indiscriminate and injudicious "adjusting" of either one or both WITHOUT KNOWING WHICH, WHICH WAY, OR WHEN, is as dangerous to health and life of case as it is safe, if correctly picked and correctly ADJUSTED.

If SPECIFIC method performs miracles when CORRECTLY located and COMPETENTLY ADJUSTED, it has within itself equally as dangerous potency if incorrectly located and incompetently "adjusted." If human life can be quickly saved and healthily restored, then that life can be snuffed out as quickly and sickness created or intensified. There is only one way of proving that an ADJUSTMENT has been given, or knowing when to give it — the COMPETENT use of an NCM.

Other things being equal, two practitioners, competitive to each other, with offices across hall from each other, one equipped with NCM and other not; the one WITH NCM will draw business away from one without it. He will get better results, on more stubborn and worse cases; therefore will draw business from other. Other fellow, thinking it is atlas or axis which is major in all of them, WITHOUT AN NCM, will begin cracking away, thinking he can do "just as well" without NCM, as other fellow can WITH ONE; and therein lies gravest danger to cases, to business and to our future of this new movement.

One of biggest tasks ahead is TO EDUCATE AVERAGE CHIROPRACTOR that this step forward is greatest in our history, but it also requires MORE EXACTING, MORE CAREFUL, AND MORE SCIENTIFIC THOT and application WITH NCM than before. In exact ratio when correctly done, it can create health; it can also induce dis-ease, and produce death, if incorrectly done.

Intelligent use of NCM is ONLY thing that will give an EXACTING knowledge of WHERE TO ADJUST; WHEN TO ADJUST; WHERE NOT TO ADJUST, and WHEN NOT TO ADJUST. NCM must be used on EVERY case, EVERY day, to produce healthy growth in the future, of health service with SPECIFIC method.

What Value Is What-You-Had-Yesterday, Today?

One who lives TODAY is so enraptured with TODAY that he seldom has time to think by-gones. Of what value is kerosene lamp to one who has electric light; a horse and buggy to one who has an automobile?

Chiropractic was born new. It started with no precedent of ancestors. No hoary past to impede its beginning. It came out of vast cosmos to evolutionize older arts and establish a new era. Chiropractic is a growing subject, progressing within itself; making rapid strides.

A few years ago, meric system was prescribed to pick places for "adjustment"; nerve tracing and taut and tender fibres were ethical to locate "subluxation."

We have not used the meric system kerosene light, nerve tracing horse and buggy, taut and tender fibres brooms for years. Altho children of ours, we conceived them, gave them birth, fostered and nursed them, fought for them thru the years—we could not render honest and efficient service today, were we to use any of them now.

— We found nerve tracings, taut and tender fibres where there were no nerve pressure interferences.

— We "adjusted" places these systems picked and afterward found same nerve tracings, taut and tender fibres.

— We found other places that had some places of interference and other places, in same back, that had nerve tracing, taut and tender fibres, none of which agreed.

— We ADJUSTED ("the adjustment with that extra something") superior places picked by NCM, checked, and found nerves no longer tender, taut and tender fibres gone. .

— We found NCM interferences, gave an ADJUSTMENT (“the adjustment with that extra something”), checked along spine, found all interferences gone, and still found nerve tracings, taut and tender fibres.

— We sought, in other cases, for nerve tracings, taut and tender fibres, failed to find any place to “adjust” by that method, notwithstanding case was sick and had never had “adjustment.”

— We sought, nerve tracings, taut and tender fibres, found none; used the NCM, found interferences, gave an ADJUSTMENT, (“the adjustment with that extra something”), checked, all readings gone; now appeared nerve tracings, taut and tender fibres.

A case comes — what matters it what it has been diagnosed? What do we need KNOW as a Chiropractor to restore health to sick, as a Chiropractor, using Chiropractic principle and practice? We must know where interference is; position of subluxated vertebra; whether or not we have given ADJUSTMENT; when not to give an ADJUSTMENT. NCM and SPGH tell — both before and after an ADJUSTMENT. These are infallible tests which have stood test of all tests and were never found wanting under test.

A case comes — what matters it what it has been diagnosed? What do we need DO as a Chiropractor to restore health to sick, using Chiropractic principle and practice? We must give ADJUSTMENT (“the adjustment with that extra something”) to restore transmission of mental impulses; we must know whether WHAT we have done is an ADJUSTMENT or not; and must know WHEN to give next one and WHEN NOT TO create more interferences.

As method of picking location of “subluxation” went thru evolution, so did method of giving “adjustment” go thru its growth from early days of 1895 of punching bumps, down to 1931 Innate recoil-toggle ADJUSTMENT (“the adjustment with that extra something”). 209 different ways and means have come and gone, are obsolete, never to be resurrected. Yet, there are Chiropractors today so far behind the onward march that many OLD methods ARE AHEAD OF THEM now, and constitute “a NEW method” to them; therefore, let someone peddle them, under a new guise, and they are purchased as something “new.”

During days of meric system, nerve tracing, taut and tender fibres, punching ALL bumps EVERY day, legislation was framed in many states; these subjects were put in as up-to-the-minute subjects proper for examination to show Chiropractors’ fitness to practice. During those days Chiropractors graduated who have since been flag-pole sitters on Chiropractic Boards. They still ex-

amine on them. That's the danger of legislation on A GROWING subject, it ties us today with yesterday, preventing us from lopping off dead timber, as it dies, and growing with new, as it grows.

Some Chiropractic Boards have not grown up to NCM; neither have some Chiropractic State Board members. So long as legislation and Boards stand still, we are held back. Progress has a way of growing in spite of legislative hand-cuffs, and state board leg-irons, rather than because of Chiropractic legislation and Chiropractic State Boards. Meanwhile, Chiropractic schools teach ancient kerosene lamp and modern electric light; horse and buggy and automobile; brooms and vacuum sweepers; megaphones and radio. Until legislation is remodelled and state board members return to school and catch up, then old wind-mill will hold back electric pump. Some day spinning wheel will be relegated to Chiropractic garret with rest of our museum pieces of yesterday.

You Don't Know, if You Don't Know

There is no way I know of, of not knowing what you don't know, until you know it; then you make contrast between what you thot you knew, but now know that you didn't know then; because you do know it now.

Recently, a man came to our office sincere and honest in thots, who was loyal to Chiropractic principle and practice; who made certain statements re a system he had worked out. It was good — better than many systems we have known previous to the NCM days. He was doing work, now, we couldn't do then. There was advantage in his system; and did we not have NCM and all that it has brot to light, we would prefer his system to several others.

We quote recent letter from this party. He admits value in NCM No. 1, does not know what NCM No. 2 can do and has proven, admits it might be far superior to old! Here is what he says:

"I am not in accord with you on application of adjustic move. I firmly believe that more people have been driven away from Chiropractic through the application of force than for any other reason. Chiropractic is construed by the majority of laymen as consisting of a bone-cracking, back-punching, painful operation, and that when you start with a Chiropractor you must continue going indefinitely. However much you may modify adjustment, it will still be construed as a punch in the back, and as long as this conception is not changed, Chiropractic and Chiropractors will not gain respect of public at large. I think in this work we have solved both of these problems. In this work, I use a vibrational application, which does not even remotely resemble a punch in back, painless and efficacious. Constructive survival value of this method of adjusting is far greater than recoil or any other method I have used. In determining survival value of this type of adjusting, I used both to compare. In my practice, I would adjust patients and tell them to return when they felt the effect of adjustment wearing off, whether it be one day or two or three weeks. In long standing cases, effect of the adjustment with this vibrational application

would last as long as two weeks. In acute cases, such as sore throat, colds and anything else where you could determine the survival of adjustment, I would use both to compare, and found that vibrational application had far greater survival value. Understand, B.J., that I have gone into this seeking the facts, have not kidded myself one bit, and others are substantiating my findings.

"Naturally, you feel that NCM is superior to this work, as I feel myself this is superior to the NCM. If I did not, I would be using a NCM. I do not and have not disparaged the value of old NCM, for I used it for four years very faithfully and tell these people that I found great value in it. I also tell them that while I have not had any personal experience with new NCM, I believe it is far superior to old."

There was much HE did not know. He asserted that he DID know; but we, having gone thru all he had as well as what he has not, knew he could not be expected to know that he did not know the answers.

We asked: "How do you know WHERE to 'adjust'?" "By the taut and tender fibres I find." That is not an absolute guide any more. You might have eight places of taut fibres and tender nerves, each would be a guide to "adjust"; but we NOW KNOW you can give an ADJUSTMENT at one place, thereby releasing all taut fibres below and restore normal feeling to all.

We asked: "How do you know WHERE to adjust?" He said: "I find the one that is superior that is tender and 'adjust' that." In many of our SPECIFIC marvelous cases, we found no taut fibres or tender nerves.

"How do you know when NOT to 'adjust'?" "If there is no taut fibre or tenderness, I do not adjust". We know this is not an infallible rule. You can have a heavy interference, creating marked troubles, and have no tenderness or tautness at that or any other place in back. But NCM finds that interference and ADJUSTMENT gets case well.

"How do you know when you HAVE given an ADJUSTMENT?" "I give an adjustment and if tautness and tenderness disappear, I conclude that I have actually given an adjustment". We tried this system thoroly, have followed it minutely, only to check back and find that whereas before there was tautness and tenderness, and now following "adjustment" there is no tautness and tenderness, yet NCM continues to show a marked interference existing, showing "adjustment" was not such in fact.

Many questions cannot be answered, except by facts NCM reveals. Great objective is to build such a system that cannot, will not, and does not fail when we must have RELIABLE information; to build a system that ALWAYS works if WE work IT correctly. Some systems, without an NCM, are better and more reliable than some

others. NCM gives THE ONE SPECIFIC Chiropractic information we MUST know; those signs DO NOT FAIL; all others have elements in them that sometimes accidentally work, oftentimes work against us.

We don't know what we don't know, until we know it; then it becomes apparent we did not know it before.

CONCLUSIONS

When we march IN parade, we see only men who immediately surround us; in immediate unit we are a part of. If we stand ON SIDE-LINES, we see ENTIRE parade, with all its men and ALL its units, and gain a better perspective of what it's all about.

Let us, then, stand on side-lines.

Years ago, in 1895, a certain principle and practice was laid down.

To this principle and practice was given name CHIROPRACTIC.

That principle and practice HAS NOT CHANGED.

It has enlarged, broadened, been developed.

1st. We pushed all bumps, not having any means to discriminate between one kind of bump and another.

2nd. Palpation was ushered in. This introduced discrimination, after which we "adjusted" some bumps and let others alone.

3rd. Palpation was developed by a meric system. We then "adjusted" only those that came within its scope.

4th. We gradually evolved meric system within scope of majors and minors.

5th It was later proven that while we thot majors and minors represented locations of mental impulse interference, not all were locations OF RESISTANCE to transmission.

6th. Now we ADJUST only major location of resistance irrespective of how many other locations of interference we thot we ascertained.

7th. Once we believed we had to crack all places possible to get anybody well of anything.

8th. We believed we had to keep hammering away, on many places, for months or years, so long as a bump by palpation — a misalignment by spinograph existed. Or, until patient told us he was well.

9th. Now number of places have been cut down to ONE and

time cut down to weeks or days — until major interference or place of resistance no longer exists.

10th. At one time we thot we had to keep opening foramina daily, to let mental impulse flow. Now we know that we have been opening one or two; closing others; and when we kept hammering away, we closed many we did open.

We have been OVERADJUSTING too many places TOO FREQUENTLY. We have gradually emerged from guessing in back punching, with a RIGHT THEORY, to adjusting with knowledge with a SCIENTIFIC principle and practice.

We have evolved from a high per cent of work and time with a low per cent of results, to a low per cent of work and time with a high per cent of results.

Chiropractic WAS and IS premised on a different, definite, certain principle and practice.

ChiropracTIC HAS A RIGHT to expand and develop along certain lines of that different, definite, and certain CHIROPRACTIC principle and practice.

ChiropracTIC has developed along its line, same as the automobile, airplane, telephone, radio, etc., have along their lines — principle and practice ALWAYS remaining THE SAME.

Introduction of SPINOGRAPH took SUBLUXATIONS out of theory understanding and put them into knowledge of scientific facts.

Introduction of NCM took mental impulse circulation, transmissions thereof, interferences to, resistances to, pressures upon nerves, releasing pressures and restorations thereof, out of theory understanding and put THEM into knowledge of scientific facts.

ChiropracTIC is a growing movement.

What about ChiropracTORS?

Where have THEY GONE?

A SMALL group has followed the TIC and kept up with the procession; they have grown as it grew; advanced as it marched.

LARGE group has not followed the TIC; they lagged behind; some more, others less; and, in exact ratio, they have gone down and out.

Some of this large group have stood still as of various years of understanding.

Others have gone backward into principles and practices of medi-

cine and have gotten out of our procession, altho still walking under our banners.

A new era is upon us. We are rapidly passing thru it. We are passing from theory to science

- guessing to knowing
- hit-all-bumps to adjusting right ones
- shot-gun to specific
- much for little to little for much.

Average Chiropractor finds himself in a mental-professional-financial-commercial conflict.

He is in a profession that wants to use sick people as a business foreground to get money.

His mind conflicts between this and that to accomplish his objective.

Average Chiropractor KNOWS that PRINCIPLE of Chiropractic is right.

His inferiority complex enters when he does not know which PRACTICE to use to make his PRINCIPLE work to attain his objective.

If PRINCIPLE IS RIGHT, then EVERYTHING in tune with THAT PRINCIPLE is right.

If PRINCIPLE IS RIGHT, then EVERYTHING out of tune with THAT PRINCIPLE is wrong.

Thousands of Chiropractors have professionally died; thousands of others are becoming foremen of small town jobs.

Why?

Thousands of new Chiropractors are professionally living and taking their places.

Why?

The procession moves on and any who stand still are passed by. There is more due in future.

New advancement will make even present look ancient.

As Wright Brothers gave an idea birth, it took Lindbergh to make us "air minded".

Our profession needs a new bath and birth, an awakening, to become TIC-minded.

ChiropracTIC cannot die.

ChiropracTORS can temporarily kill the human side of a human service they should render.

RIGHT AND ABILITY OF SICK TO GET WELL STILL STANDS UNCHALLENGED.

RIGHT AND ABILITY OF INNATE TO GET SICK WELL IS STILL SOUND.

RIGHT OF CHIROPRACTIC TO LIVE IN ITS PURITY FOR POSTERITY WILL LIVE.

Right ahead is a newer, better growth—a substantial science none can destroy.

The great struggle is on between those who are selfish, greedy, who seek power and want glory, and those who know that service, unselfishly rendered, is what makes for permanent growth.

We are heart and soul with any movement, convention, association, or group of our profession that stands and fights for Chiropractic; puts patient and his right to get well over and above any and all so-called "rights" of a selfish group to make a living, whether they do or do not render a health service.

RIGHT way is always slow, certain, and a long ways around.

What you do NOW may seemingly grow slow or fast by right or wrong way you do it but your fundamental and principle IF ALL THE WAY CHIROPRACTIC, is right; THEREFORE WILL LIVE.

The Story Of OUR MESSAGE ANALYZED

There come times in every person's life when thots, ideas, and actions crystalize into a paramount issue which, assuming form, establishes itself when metamorphosis has changed. When students leave here and go into the field, there will be times when some minor incident will happen which will convert many theories into a fact of great value.

We regard OUR MESSAGE ANALYZED as one of those condensations. It is such to us.

Let us review briefly the history of some prominent COMMERCIAL men of the modern world:

Robert Owen, an Englishman, who revolutionized the mill industry of England, was a working man who had become a philanthropic capitalist. He was a lover of humanity, filled with a holy zeal to better condition of laborer.

James Oliver evolved the plow industry, notwithstanding he was not its inventor.

Stephen Girard could see no good in aristocratic schools, so established Girard College for the common people who wanted simplicity with education.

Mayor Rothschild, founder of Rothschild financial house, changed viewpoint of gentile to respect and appreciate honesty of Jew.

Philip Armour established a system of catering to wants of the people, in meat and food products.

John Jacob Astor revolutionized the ship industry of the world.

Peter Cooper established Cooper Union in New York City, which was an institution for free thot and industrial introductions.

Andrew Carnegie established a steel era.

George Peabody was a noted American merchant and banker.

A. T. Steward of New York City incorporated department store idea.

H. H. Rogers and Jim Hill established and opened up Saskatchewan and made it feed the world wheat.

These were BUSINESS men.

We use word "business" to incorporate a distinction between thots and ways of selling matter. There was a thot behind article; it had a purpose and demanded a system, all of which led to trans-

portation and transpositions of matter. Distinction is clearer when we say the forming of matter to change matter, and the thinking of thots for philosophy's sake. These men dealt in BUSINESS wares — not in philosophies.

Each of these introduced a message. They schemed a new way to buy, sell, transport, or convert property. Without their assistance we would not have been as progressive in agriculture, railroad, finance, factories, etc. Because they were materialists does not decrease their value. Their part in the general change of the world's surface was as essential as thinkers and their messages.

Among TEACHERS — those who deliver ideas to fertile minds — there come: 1. Moses

2. Confucius

3. Pythagoras, the Greek

4. Plato

5. King Alfred of England

6. Frederick Froebel

Froebel established how to teach adults. He conceived the system that is in vogue — all school work should be a kindergarten; learn to do by doing, such as children are taught — and the nearer it becomes a kindergarten, the greater the success.

These TEACHERS do not modify thot; they change color of delivery.

A PHILOSOPHER raises question, "Why?" Why do we do this as we do? Questions lead to questioning, and he who insistentlly questions sees error which is intentional or accidental — for perfection is not of this age. To question is not only to lead to iconoclasm but also to denounce evil. Not every philosopher is constructive. Rarely do you find destructive and constructive principles incorporated in one person. He is one or other, in prominent form. To coalesce the two is to find one out of thousands. We find many destructive philosophers, but when a constructive philosopher is born he will correct evils which hundreds of destructive philosophers brot to our attention.

Socrates (by the way, he was a negro to my best knowledge), Seneca, Aristotle, Marcus Aurelius, Spinoza, Emanuel Kent, Auguste Comte, Voltaire, Herbert Spencer, Schopenhauer, and Henry D. Thoreau — these were philosophers.

A REFORMER may be a philosopher of either of above or both, in addition to which, if he incorporates spirit of a fighter, he MAY make a reformer.

In review, and to make more clear, a teacher studies ways and means of delivery. Philosopher finds whether system is right or wrong; at this point he ceases or he may attempt to and succeed in adjusting causes found, so far as his ability; but it's one thing to find defect, solve problem, think solution, and inculcate it into the world so they grasp and fight for its propagation. Latter duty falls upon reformers.

In line of reformers there come John Wesley; Henry George (who never made the statement 'I am for men'); Garibaldi, the Italian; Richard Cobden; Thomas Paine; Theodore Parker; Oliver Cromwell; Anne Hutchinson; John Knox; John Bright; and Jean Jacques Rousseau.

These men fought for ideas of others or their own. Their names are familiar, more or less. There may be some we have mentioned who are not, but many are household names, even tho dead for centuries.

We have enumerated a few men of four sections or divisions of human endeavor, each having a progressive ear-mark; each left his imprint on the marble of time, in pages of history — not that they were greater than other men of their times; not that women we mentioned were greater than other women; neither were they victims of circumstances; but they said something, did something which had in it more of truth than apparent truth which surrounded them. They propounded a larger circumference of fact — one different from that which they knew, regardless of whether a mercantile institution, teacher, philosopher, or reformer. Even tho things they did then are now taboo, thots they taught are now skidooed, problems they philosophied are now skeskunked, and actions they reformed are today out of date, fact remains their names stand for principles they advocated.

As an assemblage, we are overinclined to think we are ahead of every kith or clan previous to our time. It will take American nation 300 years to catch up with simple lesson Christ gave us; present teachings lead us from it. Politically, we will be ages catching up with truths of Thomas Jefferson. They are "out-of date" only as we are behind them.

Materialistic or immaterialistic progression is much like education of a child who learns A-B-C. Each is truth in itself so far as it goes, but truth is purely comparative, creative, microscopic. This something was THEIR MESSAGE to the world.

In summing messages of others, there arose this question: Are we making a message for the world? If not, it is bone to bone, dust to dust, earth to earth, and we are forgotten when gone. We

wondered whether or not we were making a message which would live because of itself. We analyzed our position, and give it to you. Whether or not it contains a "message" is for you — the people — to say.

We have had a substance before us constantly — man. Therefore, we are a materialist so far as desire to revolve matter is concerned. We saw soil worked or subject to be fertilized, yet untouched. We deduced man's actions and thots and found he was wrong in many. Things thot right deduced wrong — we are destructive for we disillusioned thousands of their confidences; we destroyed trusts in doctors, lawyers, and ministers; we caused settled conditions to become questioned; we made dissatisfied the placid pool of human endeavor which was content. Hence we were a destructive philosopher for hundreds of thousands learned to believe us right and others wrong. Having awakened the thinking propensities of man to their wrongs, we constructed a better plan. Wherever we destroyed, we built. Theory of disease we replace with subluxeation fact. We overthrew theory of treating effects and created adjustment of cause; therefore, we are a constructive philosopher.

Having multiplied our following because of a betterment principle being demonstrated we rubbed shoulders with powers that be, obstacles galore were placed in path. We fought them, beat them, tested their validity, secured justice by mental conflict, published facts as we saw them, preached them publicly; public press gave freely of space, courts were filled with our contentions pro and con — we were successful in maintaining our position, growing and fattening upon discussion, prosecution and persecution; hence we are a successful reformer.

Essential elements are necessary to make business men. Destructive and constructive philosophers as well as reformers have proven our lot — not by choice we assure you for that path is unpleasant.

One who presents a message to world (and it makes no difference which viewpoint) introduces new thots. That means new actions; it forecloses old ways. These people whose business names we mentioned have changed, — modified in an indelible and inerasable way the manner, form and style of products that land, soil and minerals can be put into. These teachers, philosophers and reformers have changed schools; systems; studies; caused ideas and their propagation to change; until every other phase of world is modified by each one thot of their time.

Some of these men have changed chaotic morals to cosmos of same; some have altered eternal law to cosmothetic statutes; and some have fluctuated superstitious teachings of an educated therapy.

They have great ability to change lands, forests, wheat fields, dig a hole two hundred feet — make a bowl to where below was coal; transport it: lay a steel ribbon from Atlantic to Pacific; change viewpoints of skies. These men have changed viewpoint of everything which had to do with the OUTSIDE of man.

These men and women modified direction that man's functions may pursue, but none enlarged, broadened or made more correct and exact function itself.

These men, gone before, USED men and women, steel, coal and wood; they employed things that were. They tried to direct direction of expressed FUNCTIONS of man to better advantage. They have taken iron from ground, made it into steel, and built an engine which traveled at 60 miles an hour. They utilized, bought and sold, what man possessed. They didn't amplify his possessions, and man can only possess what is his by birth which no man can take and never return — his life. None of these enterprises expended more life in a muscle or gave him any possibility to get more. None broadened man's horizon of himself. They turned over what belonged to one man, to another such as he could hand down or receive by death or inheritance — chattels, and real estate, and such as may be stacked in bonds or bank deposits.

Have we, today, any different viewpoint? Can it be that we have a new angle of this old subject which is or will be complete, thoro, that it will leave its imprint?

Our message, in brief, is to rebuild and reconstruct man FROM WITHIN; thus he will use to better advantage powers he already possesses. It will not be necessary to look to outside for things he already has and knows it not. If that message be true, he will be a better man because he could not do otherwise.

It is not our idea to teach into man anything more than what he now has and retains. We shall not ask that he loosen his grasp on truth for a falsity. If he possesses truth, then may he retain it forever, for any assailing we may do will be impossible; should we tho find a chink or weak link, or many thereof, then his "truth" is vulnerable and thereby will we do him a favor to show him the outs. We do not propose to drill him into more and different forms of fixed and habitual actions, neither do we propose to exteriorly dress him in a new garb — that which should have made and will make him better has been forced backward, driven into a corner and held there. All men are previously good but previous to expression of that goodness, it is perverted, hence evil personified in degrees according to perversion. Man's brain has been poisoned against his interests; his body benumbed from proper

sense recognition; muscles bound so he knows not their possibilities; and, as we pursue, you will note balance of his kind have strengthened these irons, not weakened them. Perversion is not his birthright, but a prison the races have made for each other.

It is a truism that all man does comes because of thot; all man thinks is because of thot-actions changing form WITHIN him. Medicine, injected from without, could not make thot greater, altho it can modify its transmission. Neither can food make greater muscular contraction altho it has possibilities of changing course and intent.

Our message is to rebuild, reconstruct man that he will think greater, be a power because of a majestic reservoir having been tapped from sources heretofore not conceived because of origins known, not yet recognized. Thus do we modify man's thot and actions by making them sublime, providing we accomplish what this message calls for.

Endeavors of men gone before were to REGULATE OR CONTROL function already made. Our aim, is NOT to regulate or control anything, but to permit GREATER GENERATION, so that increased function generated can transmit and express thereby, control and regulate ITSELF. It is one thing to have an automatic regulator on a steam boiler and another to give to boiler such intellectual capacities that it can, by internal desire, control and regulate its actions.

Man has been regulated and controlled by other men because of his incompetency to regulate himself. As with insane, same must rule; as with criminals, "law" abiding must control. When man becomes competent in thot, competent action follows — when competency displays itself, he is in self control or auto regulation and purpose of external control is frustrated. No man has yet reached that state of perfection where he is Great Exemplar for rest, yet every man should be such. Our message brings idea that every man possesses this perfect competency but because of accidental obstructions they are delayed in production and stifled in action.

Those gone before, preceding this time and age, built empires OUTSIDE of themselves. Jim Hill framed an empire in Saskatchewan. Andrew Carnegie erected an empire with steel. Each has composed an empire OUTSIDE; but where have they given vent to an empire within man OR PERMITTED THE EMPIRE THAT EXISTED WITHIN TO WORK ITSELF OUT? Our message is to let unit empire within have natural universal expression, without visible regulation and superficial control; because natural thinking and expression is its hidden regulator, its internal

control. You will concede, if every man became rich in ships, gas, railroads, steel, iron, coal, he stole it from nature. From nature it comes, and back it goes. But those men who have made their millions, are today making this cry: "Back to the farm." We further illustrate by saying that every man who stood forth as a beacon business light, or whose physique was a beauty to behold, who was respected, honored and upheld as a mental model for children, received all he possessed from "Nature" which flowed from within and he but gave vent to what he owned, and even then half had never been expressed. Our message brings back this cry to you, from these mentally and physically wealthy men — "Back to Innate" from whence we RECEIVED. All you are or will be, all you think or can think comes from that source — if, tho, YOU were the individualized source how much greater could you do and think?

"Nature" is Innate Intelligence; Innate Intelligence is Universal Intelligence; and Universal Intelligence is God. God is infinitude, and consequently all attributes that we conceive we give to God.

God is but a name we educationally give to ruling power of matter. We do not comprehend it, except in part. All truth is it. God is neither he nor she — it is thon. Being a spirituality it is sexless, formless, and only assumes form or sex, shape or color according to object in which it personifies itself, be it tree, animal or man.

In Library of Congress, on mosaic ceiling leading to library proper, are inserted three words. They embrace "Three Learned Sciences" — Medicine, Law, and Religion. We wish to show our concept of change and where we take issue without issuance, where we destroy, reconstruct and prove right. We shall annihilate a viewpoint — which we grant may be wrong — we shall not entirely deny, only in part. Wherever we reject we shall replace with knowledge for present belief or faith. We gladly relinquish shadow for substance — as quickly deny theory for fact, faith for knowledge.

GOD IS LAW — LAW of universal. That regarded as "law" made by legislatures is no more law than baked clay assuming shape and form is man. One is a faithless and artificial imitation. God is Law itself — man's make a disgraceful misportrayal.

GOD IS "GOOD" minus O. What is right and wrong are concepts long ago disposed of by God in thon's deliberations in running world. We could not conceive of a rose-bud doing an immoral act, it is grown by God. Man should possess same attributes before his Maker. In furtherance, that Good is God and God is Good,

man has artificially constructed many theoretical superstitions and mythical systems, therapies—religions and regulations—all of which are fickle and capricious mockings. God is morality itself—man makes disgusting caricatures.

GOD IS HEALTH—all life is given, all death is taken by thon. It is a condition man cannot abridge, repeat or duplicate, give or take, reduce or increase, in part or whole, in speck or cosmos. It has its own comings and goings. We can neither add it to a body nor take away. Health is not in a pill or an operation. God does not wrap Himself within prescription papers, poisons; lock Himself in when the cork is plugged, or jump in when ribs are made and prefer being sewed in after stitches are taken.

All health, law and morality we desire for ourselves, friends or enemies must come uninterrupted from a source unto all alike, upon which all do agree and in a way beyond all dispute or question—from subconscious, self-subliminal, self-mature, instinct, Vis Medicatrix Naturae, soul, spirit, or Innate Intelligence of Chiropractor. These terms have one and same meaning, they individualize the inner self—the God within man. Innate Intelligence is a Universal Intelligence and that is man-God.

When we want essence of law, truth or health, we go back to God. We agree upon that common viewpoint; and we want to, step by step, proceed from universally accepted opinions to those upon which we differ. At present, your minds are in a quandary—not that you DON'T agree, not that you QUESTION our statement, but because THE MANNER in which it is presented is different. Understand clearly, we have not denied God; on reverse, have proven it is the logical, consistent and reasonable beginning of our message.

You will concede if we could hypothesize a man who had no vertebral subluxations, his Innate Intelligence would be free to act in his body, as IT desired. If spirit be free to come and go at its own inclination, desire or will, its body would be materialistic counterpart of immaterial. Body would do what mind willed. If Innate Intelligence is Health and Innate flows freely to all parts of body, then body duplicates, in action, what Innate will in thot, WHICH WOULD BE HEALTH. Then man must be healthy.

Tank may be full of water, hose in proper conduction condition and connected, and all of flower bed with its bushes ready to receive; but so long as faucet is turned off—nothing doing. Turn on faucet, doing of which does not add or subtract to given quantity or quality of water—it gives the principle of gravitation, freedom to flow water from where stored to where needed. That is all you

accomplish when adjusting a subluxation, is to give freedom to Innate Intelligence, so INNATE may personify itself in organs of body. You are trying to permit a re-establishment of a closer union between Innate Intelligence (immaterial) and stomach, liver, or spleen (materialities) for purpose of establishing equilibrium — HEALTH, all of which was in abundance at source and would be at terminal if it could get there. If you have not established this purpose in your Chiropractic mind, your adjustments are a cipher as regards your purpose of doing things.

Health part of message we teach, perhaps not quite as broadly as stated, but in sum and substance, you accept as purpose of Chiropractic — to make man healthy. To that extent you are taught; that part you grasp, accept, understand and practice. Should we step forth boldly and declare that adjustment of a vertebral subluxation was for ultimate purpose of permitting closer communion between God and man you would decry our premise, not because you could logically disprove or deny one iota, but because it was a new viewpoint you have never considered, therefore subject to hasty criticism.

Let us make our next premise. Imagine another individual, if you will, whom we hypothesize, who has no subluxations, whose Innate is free to act; THEN THAT MAN REPRESENTS PERSONIFIED LAW, and that man could not do wrong. God being law, God being in man, God being free to flow in man, man must be the action of thot. Thot could be no more or less than law itself. Man would be law as expressed. Law is proper thing to do under proper circumstances. It is individualistic, then communistic, then universal. All constant law is founded upon God, then from man to man, then to all men. Value of statutes is defined as "Those STATUTES are most valuable which express the common opinion of common people on a common subject"; but "Law is individualized expression of God thru a composite form assembled for that purpose." This does not limit God to express law only thru man, but other animals and vegetables. That being true, that is a part of our message which should be taught, you should accept, grasp, understand and practice. But you say that making man into a law is one subject and making men healthy is another. You accept first and beg second. If you will consider that source is the same and from source's viewpoint health is law and law is health, hence health and law are one, why divide them, accept one and eject other — a condition as impossible as to contradict drawing of water into clouds when sun shines. You could admit sun shines and deny drawing of moisture, yet it is in spite of opposition.

If same man has no subluxations, and his Innate Intelligence is free to act thruout his body, THEN THAT MAN PERSONIFIES MORALS in any and every viewpoint; because source of his innate is fountain head of morality, and nothing can be greater in morality than infinitude. God is good, God is sincere, doing right thing, at right time, under right circumstances in right place. All morals are sunbeams from itself. Ten commandments are personifications of Innate's intents as personified in men and women. But that moral part of this message we should teach, and you accept, practice and preach. Probabilities are you would offer rebuttal on ground that this is taught at your church, that you did not come to a "medical college" to learn law or religions.

We assume your mind, so far, stands as follows on this last idea. "With health question we agree except that you have gone too far. It's consistent to adjust man to get him well, but when you introduce the God attribute we disagree. With law phase, we leave that to 'law makers' who are elected and they know what is best and right. Our purpose in coming to a Chiropractic school has nothing to do with their squabbles and disputes. As to religious viewpoint, we could not countenance your preachings. They oppose all we know or have known; what we have been taught or desire to know along these lines. We are satisfied with our spirituality as it is."

Our reply, in brief: — We study MAN. We make no claims to be a student of religions, statutes or medicine. We have not studied this or other worlds, clouds or bowels of earth. We have never been off this planet and don't propose to until it comes our time, then we'll go willingly. But, we do claim to be a student of man and theological, law, or health questions with which he comes in direct or indirect contact — they have a bearing on his condition. All man may think, do or sense — that he can give or receive, comes prominently within our sphere of study. There is but one man, he has one source and one body.

At no time or place can we disconnect any material part from any other material part, or satisfactorily disassociate any immaterial part from any other immaterial part without disintegration taking place to the part separated. His soul, spirit (or what other title used) is ONE, no more, no less. As his body (1) cannot be separated from its other parts, neither (2) can its Innate be separated from its various attributes neither (3) can material be separated from its immaterial — they are separate and yet one entity. They are one and must be studied as such.

As we cannot draw dividing lines between hand and wrist, neither can we make division and say here one ends and another

begins; body and soul are one, attributes of which it has only as you arbitrarily make them which is unjust to source or its product.

If you see ONLY health in Innate, then that is arbitrary — if we see health, law and morals, then that is also arbitrary, but not as unreasonable an assumption.

Assume three concrete examples, each will involve one of these cardinal subjects. We will show present evil, prove it is such, then be constructive by replacing it with something better; then, if necessary, force the fight for its existence.

The Health Premise

Patient A. has a subluxation — he has indigestion in stomach — subluxation fact of which WE are aware, symptomatology of which HE is aware. Diagnosis consists of pepsin to stomach via mouth. Purpose of giving pepsin to stomach is with premise that HEALTH IS PEPSIN; otherwise why not give aqua pura, ground radish, or anything else? To assume that "health" was OUTSIDE of pepsin would be to preclude necessity for giving it — to assume purpose of giving pepsin is to tickle "nature" would be to admit that hot water or vinegar would have done as well — therefore, by subtraction we are forced to give ear to therapy principle that health could be given to patient ONLY by injecting FROM OUTSIDE TO INSIDE, pepsin, "health" being wrapped in substance given to substance.

Could this man live without pepsin — whence comes life? Would he die if he never received pepsin? Does pepsin save life? Does it "cure" him? If pepsin is needed and is absent, why? Where does natural pepsin come from in health and why absent today in him who is sick and present when well two years ago without visible intervention of man? Must one depend upon another, from birth to death, for pepsin? Why this deficit of where man is independent in bile secretion and stomach dependent upon another man for pepsin? Surely something is wrong in reasoning or actions.

The Chiropractic idea advances this constructive philosophy: Life — Health — is Innate. It flows FROM WITHIN OUTWARD. Its seat is man's brain, its channel is thru spinal cord, its messengers are mental impulses which travel thru nerves until they reach organ from which intended. To have a subluxated vertebra is to produce pressure, decrease carrying capacity of that fiber, thus making possible flow from and between Innate — Health — in brain, to organ in abdominal cavity as in function. (We are assuming, for brevity, that our listeners know Chiropractic — Edit.)

ADJUSTMENT, in this example, would be at atlas for purpose

of permitting freedom of Innate Intelligence, so Innate would be equally balanced between (1) quantity generated at brain and (2) quantity expressed at stomach — which conditions co-ordinated are equivalent to health. Health CAME FROM INNATE, FROM WITHIN; not tended and called into play, resources of empires within which before were untouched. It was a reservoir running over but side-tracked.

Comparison of untapped resources of man is similar to those of electricity. There is electricity in air, it has been there thousands of years — it is not a new invention of Nature, concomitant to this 100 years. Notwithstanding it always existed, it took Franklin and Edison to tap it and harness those forces.

This is further true of man and his Innate-forces within. These forces were WITHIN Adam and have been in every vertebrate born since — they are not a new device or contraption of Innate Intelligence, in existence since 1895, when D. D. Palmer observed their existence. Notwithstanding, tho, they have always existed, we are today outlining them and their possibilities, they were always same — it took the Palmers (father and son) to tap and permit man's forces to flow for man's needs.

Can it be that man could supply his own pepsin, following this vertebral adjustment alone? Could it be that an accidental adjustment could take place and our patient get well? Without external addition of pepsin, could he soon be making his own internally? Is it true man can be born again without being "born" again? Is premise true we are complete within ourselves but we should "Know Thyself?"

By comparison, experience and present teachings you grant medical teachings are wrong and you readily acquiesce that Chiropractic premise is true. You either have been a patient of both and know or you have listened to stories of those who do. Perhaps you have been instrumental in trying both upon people, therefore, this is real.

If giving pepsin from stomach of sheep to stomach of man for purpose of giving more health IS wrong TODAY, it was wrong yesterday and will be wrong tomorrow. This embodies principle of WHETHER TREATING EFFECTS IS PROPER OR NOT — WHETHER HEALTH IS IN SOMETHING OUTSIDE OR INSIDE.

If giving an adjustment upon a subluxated vertebra within man for purpose of permitting life within greater flow and expression is right today, then it was right yesterday even though unknown and will be right in ages to come when used. This comparison sums

up whether or not older system was truth. If not then it was always wrong. Age of a question never has determined justness, but because many think it does, that's why we introduce it. You grant our Chiropractic premise because HEALTH IS IN MAN, not in pepsin.

In first or health example you agree, otherwise you would not be in The Palmer School of Chiropractic studying what you are pleased to accept as "Chiropractic".

The "Law" Premise

Example 2: We have an individual who has a subluxation. **CONDITION** he realizes is sexual perversion. **DIAGNOSIS** is complaint before Grand Jury, with indictment prescription issued against man. **TREATMENT** is to be tried in "a court of law" before "a jury of his peers" — (assuming that twelve men do not do acts he is charged with doing); therefore, are his peers. Verdict — that is, **PROGNOSIS** — is a commitment to jail. Why? Case in court consists in two things — (1) law and (2) fact. "Law" (?) says any sexual pervert shall be punished by jail sentence. Accusation was this man **WAS** a sexual pervert. Testimony **PROVED** he was. Jury **CONVICTED** him of being that. **CURE** is jail sentence, seemingly with that a sexual pervert can be corrected **IN JAIL**. In our former illustration we have health cure **IN PEPSIN**, now we have legal cure **IN JAIL**.

Warden Sanders, of Fort Madison (Iowa) penitentiary, says 50 per cent of his "birds" are under 19, and 75 per cent under 24 years of age, bearing out hypothesis that crimes **ARE** functions gone wrong. Rather than **CONTROL** function **OR** **REGULATE** it once made, it were better to reconstruct man that even function would be normal — according to body law.

System of legally treating effects is, has been, and will be wrong as long as practiced. There is a seeming wakefulness of the medico-legal fraternity of today, with that that crime is a disease — to extent of trephining skulls, relieving pressures, cutting out certain lobes of brain having its seeming effect — we say **SEEMING** because we later tell why.

This department of that, in itself, should cover a book. Man can do two things with his body — use it to think or act with. That precedes every and all acts. If he thinks right, body acts right, **PROVIDING** — proper that gets thru to muscles in equitable quality. To commit sexual pervers, immoral or criminal thinking or acting persons to a reform school, home for incorrigibles, penitentiary and other "corrective" institutions having fundamental that

IN such restrictive measures there is that which will cure evil thot or criminal act, is abortive to fact of justice and Innate — within any man who is sent in or sent him there.

To lock any man behind bars because he represents a type of perversion is not to prove that cure is IN jail. Jail will do nothing to improve THE MAN.

What reason have we to believe there is anything in sombre walls, iron beds, woolen blankets, breaking rock or learning a trade that will change internal function from abnormal to normal? If function was matter such as educated man could in part or completely control our argument would be useless. Ask any person to regulate quantity of bile to be secreted, to control its flow, its quality and color — as well ask him to stop moon from circling globe or sun shining. Man has no control internally; he obeys what flows.

We would say, in this particular case, an adjustment of a subluxation would be proper. Why? Because sexuality or virility is within. It is choked; locked; turnkey has blocked it within so it cannot act without. We say: "Unlock door by adjusting vertebral subluxation. Permit current to walk forth in skylight of its own body. Enact normal sexuality. Sex is in man, and sexual aversion is possession and exclusive right of inner thon and thon only.

"Law is presumed to be epitome of justice — it is when law is law; but when statutes are mistaken for law, their enforcement is epitome of injustice. Statutes are presumed to be consensus of opinions of elected men, whom we select for purpose of regulating and controlling those amongst us who need such. If we commit no murder such enactment would be useless for such as we. If NOBODY committed murder ANY enactment dealing with murderers would be useless. Why do not we commit murder? Is it because we have brains, and the murderer not; because we have better sense than he; because we know consequences of our crime whereas he does not; because circumstances don't force us and they do him? We find murderers among rich and poor, high-brows and human apes, sanctimonious preachers to an understood level and all non-murderers to an appreciative common basis. Is it that all murderers think murder and all such act such? Why?

Again note perverted function. If function is perverted why make statutes which see how much of function once made and gone wrong shall be regulated and controlled? Why complain of ill-shaped lines of a distorted body? We cannot stop it. Why worry over things once said, and done. Time to worry is before they're made — go back to cause, back to source. If once made, then back

to source for your reparative forces. If that is perfect, it would be better to permit perfection to personify itself — and it will if there are no obstructions.

Why build an exaggerated system of statutes, capitols, elections, police power, public and private institutions to be maintained at expense of tax payers all to end of thinking that crime can be treated by commitment and cured by incarceration when in reality all law is in law?

Innate is law, law is Innate; God and law are one. Innate lives in man, man should express Innate-law. Innate is law and God. If God-law is Innate and Innate flows thru man why wouldn't man be a God-law functioning man? He would. Law and order are in man, not in jails.

If system of permitting God-law to flow freely thru man is right today, it has been just for centuries and world is wrong in its present system of jurisprudence. Being true, great reforming is needed to set it straight. Says Sercombe, in a lecture before Congress, on the hearing of Mann bill — "It will be shown that office of physician and healer has come down from past as one of variations of the ancient high priests or "medicine men" of tribes. That these high priests or "Wise men" of old, combined in one person offices of our present learned professions — doctor, lawyer, teacher and preacher. That while our Constitution provides for separation of priests of theology from affairs of state, we are menaced by a greater danger because priests of medicine were not also excluded from affairs of state." History repeats itself — at one time students of men studied all these viewpoints — now they are separated. Can it be they were then right, now wrong?

Possibly you are conceding there is justice to these considerations but you cannot see how we can overthrow present system. We are not asking for radical measures, neither do we expect a revolution to get truth into people's minds. To adjust subluxations of illegal mortals is sufficient to accomplish a healthy and legal restoration. Adjust as many of each class — if you see classes — as you can. Those who are symptomatologically sick, adjust them. Those who are legally adjudged and are criminally sick, adjust them. That said and done, force and revolution are not needed. It has all taken place — but from inside outside.

What is to be, will be. We cannot evade inevitable. What is law will express itself. Notwithstanding you may not agree with our premise on this subject, every time you take or give Chiropractic adjustment you permit Innate to express itself better in your tissues; hence, you are being reconstructed healthily, orderly and

morally. In spite of your preconceived educations, — Innate knows best and pursues thon's path nevertheless.

The Moral Premise

Take our third example. We have a sublaxation at atlas. Condition is that of educated mental torpitude, of any of thousands of types that might be mentioned.

(The educated brain and its functions — external reasoning powers — are to Innate Intelligence what liver or other organs are to same source. Educated brain is an auxiliary same as is stomach, it assists to fulfill general scheme of man, which is divisible into that internal part of which every cell is an integral and external of which we have limited arbitrary use of a part of our brain (Educated) to govern a part of our body.)

We have shown how, sexually, we might have a sexual pervert and make of him a criminal. Permit me to show, mentally, how we might have a mental pervert and make of him an immoralist. To produce sexual pervert we introduced an obstruction between God-law of man and his sex-organs. To make of man a mental pervert introduce hindrance so that God-morality cannot flow from man's Innate to his educated brain.

DIAGNOSIS of symptoms is a complaint to some dear, good, kind, friend — your father or mother; perhaps minister; perhaps a brother or sister. As a result of that complaint you get a curtain-lecture; "You shouldn't do this; you must not do that; you must cease this at once. Don't you know it is wrong? Can you imagine what it means to look, act and to think this way? You are in common disrepute with your friends. You will ruin your position in society;" and so on.

To appear before highest spiritual advisor you know, is a necessary action, of course, because he is a past master in spiritual matters. You feel, it is THOT that has gone wrong because what YOU HAVE THOT is condemned. By time you realize what you HAVE thot is wrong, you HAVE thot it, then you begin a systematic campaign of condemning yourself for thinking what you did, further spiritually chastising yourself you won't think such again.

You drop upon your knees, ask forgiveness for thot which you couldn't help, for thot already completed, and pray with hope it won't duplicate itself. You are as powerless to prevent its duplication as to stop sun shining because it withered your plants. Your plants withered because they were dry, not because sun was hot — your brain thinks what it does because it hasn't force to think otherwise. Let A. be Innate brain; let B. be Educated brain. All

that B. can do depends upon quantity flow from A. Let C. be stomach. All that C. can produce is equivalent to flow from A. also. A. is source and B. and C. are dependents. B. does not affect C. A. effects either or both. It would be folly for B. to try and control C., and equally as impossible for stomach to control what B. shall think.

TREATMENT is spiritual advice — spiritual, contrasting it with material treatment of pepsin for stomach; or a scolding; or a whaling on gluteous maximus if young enough. You give yourself a curtain lecture — it does not matter whether somebody gives it to you or you give it yourself; fact remains purpose of doing this is to bring forth a physical or mental sacrifice of some kind. "Go without meals for day, you will purify your impure thoughts." Man's thinking propensities are dual — the educated, its capacity, character, and quality over which he has reasonable digression and control. Innate, tho, is absolutely at mercy of no other. Insane individual is insane only in educated brain, never Innate. It would be useless to ask an educated insane person to change insane thots, for if he could he would have done so without suggestion from you. No insane person is such because he likes it, neither does he swear or do immoral things because it's a pleasure — but because power from Innate Brain (over which he has no control) cannot get over and into brain (over which he would have control), if he had power with which he could. He is insane because he is — he is immoral because he can't be moral. Morality is the result of 100% flow of forces between Innate brain and Educated brain, then Education recognizes morality. If there is a fraction of this flow, between two, then moral is no greater than quantity received, recognition between ditto. It would be valueless to ask this person to think with that which is absent or expect him to be moral with moral power absent. In other words, morality of individual has gone wrong because of an atlas subluxation.

My message brings forth that an adjustment of subluxation at atlas, is necessary. Why? Innate is an infinitude of morality. Let Innate get into educated brain and you must be moral whether YOU wish it so or not. It cannot be otherwise. Then morality is personified.

There are moral people in and out of churches and bad people in both. Why this seeming contrast? If goodness consisted in listening to good, then why are some church people bad? If badness consisted in being divorced from church, why do we find good people outside? We can find, even here, a common basis upon which to build our foundation from church, from minister, TO

MAN. Can it be that a book makes bad people good? How about the good people who know no good book? Why?

Man is a free, moral agent unto himself. Possibilities of such are wrapped within himself and no other. Health did not consist IN pepsin, neither did sexualy eversion consist IN jail, nor does morality come FROM church — ALL THESE ARE WITHIN THE MAN.

We took three concrete examples: First, a subluxeation, making stomach have indigestion, for which others have pepsin. We suggested letting THE POWER FROM WITHIN flow to make health. Second, that of a subluxeation, making sexual perversion for which you suggested jail, thinking that IN JAIL was sexual remedy. We suggested an adjustment because LAW WAS IN THE MAN. Third, was on question of morality caused by atlas subluxeation, for which you say: "Give man educated religious treatment;" for which we say, "Adjustment" for MORALITY IS IN THE MAN. And in none of three examples can health, law or morality get forth.

If a man — if men (and under "men" we include women) had no subluxeations, then consequence inevitably proves itself he would be health-abiding, law-abiding, moral-abiding, for Innate is all these in one. Innate is health, Innate is law, Innate is morality. Law, morality and health are synonymous with "Innate."

Let us take a look into our present day, three main systems; present system of therapeutics, jurisprudence and religion. All aim to regulate function AFTER MADE AND EXPRESSED. Message we give is to so adjust man that functions will be regulated by one and only regulator — Innate.

Innate will flow right quantity to an organ thereby creating right quantity of action to equal health therein, thon will do this in every living tissue — man is well. Innate will flow right quantities of current to sex organs and educated brain — sex crimes and irrational designs could not occur — hence, TWO ONLY sources of crime are averted. No crime — no statistics, misquoted "law." Innate being free will make man a willing and cheerful thinker — hence he ceases to have cause to treat his abnormal mental states with previous erratic illusions regarding present and future whereabouts if he doesn't think right.

Rather than let expression in one incompetent regulate and control action in another, it would be better to so let creator of function in each regulate its own expression. And this it would and could do, if there were no subluxeation; therefore, nothing for regulation or control but normality and that needs none.

Dominant thot of medicine, statutes and religions is to treat

effects after having been made and gone wrong. Dominant method of accomplishing this intent is with REGULATION and CONTROL of functions gone wrong. If man is normal in functions, there would be no effects, nothing gone wrong to treat, hence systems of medicine, statutes and religions would fall because of lack of need for which they were given birth. If regulation and control are necessary, then they must come from within, recognizing of course that as we get it, it still comes from a higher source. But, we are making a distinction between pepsin, jail and supplications and control within. We are saying when restoration comes from within, regulations or control will be absolute without. Facts issue always from source rather than a tributary. Hospitals, jails, asylums and houses for the friendless are indictments of our civilization. We not only build these, but we also go on teaching, training and breeding candidates for admission.

To treat therapeutical effect, to incarcerate legal effect, to intimidate moral effect, are wrongs against cause; they are CRIMES against Innate. If Innate would speak in voluble words, thon would say: "If I could act in every man in penitentiaries as I would like, tomorrow gates would open and every man walk free from within, not from without." Thon would further say same of insane asylums, and all hospitals.

How much better it is to adjust matter that composes us so that cause — cause being synonymous with Innate — can co-ordinate effects, so we can pursue knowledge path thru life. Teachings of physician, lawyer, of minister, convert MADE thot and act into a modification of itself — which fact must stand undisputed. Physician treats pathology, only fact tried by court is act; only thot moralist judges is its character; and these conditions are ALREADY existent, come and gone; as, for instance, we have an excess of acid NEUTRALIZED by injection of EXTERNAL alkali; or we have too much or too little of sanity CONTROLLED by an EXTERNAL straitjacket; we have an excess or minus of morality REGULATED by prayerful pleadings of spiritual friends during our incarceration.

My message brings you this; it makes possible a greater current PRECEDING thot or act. You are then in a condition where GREATER thot and act can come from within to outside where it needs be. Former deals with product; we deal with producer by contrast. These men whose names we mentioned dealt with products — things men said, actions men did, function after expressed. We deal with Innate, making all possible for Innate act; therefore bringing out from your greater self exalted things.

We are called, as a Chiropractor, to a home. Person not well, been sick 3 days. WE ask no questions, no information is given. We find subluxation, adjust it. In 3 hours "fever" abated; in 5 days patient back to work. Who knows what it MIGHT have been? It could have been typhoid, maybe smallpox, man might have died, his wife might have "caught it" and so we MIGHT surmise for weeks. What it might have been NEVER DEVELOPED because — adjustment was given. Example 2. Man, with wild gleam in his eye, approaches another stealthily and sneakily. His right hand is held in his coat. We approach this individual, ask to palpate his atlas, do so, adjust it, have him rest, meanwhile current has begun to flow, he realizes better what existed before. What might he have done? How many murders he might have committed we know not. We don't know what courts of our land MIGHT have been called upon to do. Why? Subluxation is adjusted. Same can be said of man who finds necessity to bury his soul in some religion — if circumstances could be changed — all necessities would compose themselves.

Natural man, if innately thinking and acting, will be constantly within his legal, moral and health rights, for he could not go wrong. If we have no subluxations we could not commit murder; therefore murder statutes would be of no avail. They might as well not be made. If we had no subluxation, no sexual perversity; crime morally interpreted would not apply. If we had no subluxations we would not be sick. Therefore medicines might be buried for service we would have for them. If that hypothesis be true, being we have these things unto ourselves, we could not help but be that way to others. Thinking good thots, how could we express them? Being well, how could we look sick? Being law-abiding, how could we commit murder? We would take that position not because of educated choice, but we could not do otherwise if we would, and we would not because we could not; and we could not because it did not come from our inner-self.

Having a PURE flow from Innate, man must be pure; having a JUST flow from Innate, man must be just; having a NORMAL flow from Innate, man must be normal, and what more could he ask? Coercion, education, cajolery, threats, fear or hate would not modify his intent, because design was made before thot; thot existed before the act. Why punish thot and act by medicines, incarcerations, or mental whiplashings? It would be better to restore NORMAL INTENT by adjustment.

The more natural a man is unto himself more does he reach type of being a native to his surroundings; and by "native" we mean aborigine, such as, North American Indian, early settler, one who

lives back in hills and does not know about early strife of railroads, subs, steam trains running 60 miles an hour, 18 hour specials to New York, and all that. One who does is not a native. Native — we mean one who lives naturally, follows intuitions, instincts, and what we don't do one time out of a hundred when instinct and intuitions do come to us.

(We're questioning how far boasted standards of education have unnaturally degraded us. It has its pros and cons — but, that's a subject by itself, at some future time.)

Native clothed himself with nature's clothing, ate nature's foods; laws he recognized were natural. But what about today? We are educated to bundle ourselves in clothing, eat highly seasoned and misappropriated foods; we gulp highly-mixed cocktails and Martinis; we exist now in an age of statutes until libraries groan; we are surrounded with morals until they are a burden; we are loaded with medicines until pharmacopoeia bindings burst.

Native wears no clothing; the nearer he approaches natural life the less clothing he wears. He eats natural foods, as they are naturally prepared; drinks natural fluids; sleeps at natural times and in natural quantities; works until naturally tired, and sleeps until naturally hungry. That is natural life. Only native can do it. We are educated. Forced thinking and acting — (emphasis on "forced") — are conditions under which we live. Educationally compelled to do things our instincts and intuitions lead us from; intellectually coerced we are unnatural. Hence native laughs at us and we laugh at native. We call him a fool, and he calls us one; he is natural, we educated. Which is right? What was first?

Native lives in woods; we live in cities. To him, woman in nudity is pure; there is nothing artificial in his life. We are entirely artificial. Only a few days ago we went to the Art Gallery on Michigan Avenue, Chicago. A woman came into the nude-art room, she saw a nude woman and a man on a pedestal, she blushed — face turned red, jerked her husband and ran. "I am ashamed you brought me here, in Chicago, the land OF EDUCATION". She lost respect for her sex, for woman kind, for her husband. They were no longer beautiful; they were nasty. Education on one side and naturalness on other. We say this is forced mode of acting and thinking, for her promptings, had she been alone, would have been to stare an hour at perfectness of figures.

Those who live natural life are more moral, law-abiding and healthy than we who clothe ourselves forcibly, with endless regulations, live in city neighborhoods of questionable morals and boast of our medical education.

Native never built a 20-story building; or strained himself to a bit of manual labor to force himself; and, consequently, in proportion as civilization and education make advance (?) they introduced sickness, because they force conditions of life, force man, woman, or child; and forced manner of living induces a strain, and strain a concussion, and concussion a subluxation; and subluxation induces stretched moralities, alien legalities, and foreign health viewpoints — all of which we have been TRAINED TO TREAT rather than to NATURALLY adjust. Civilization induces sickness, sickness begets crime and crime needs alleviation — mental or physical punishment, or both, and generally it gets both.

Modern man is sick because of two fundamentals — accidents or forced subluxation from that source, but it was as liable for him to have an accident then as for us now. Only sickness the native had would be from accidents — barring them he was much better than we. Today, our people think a second worth \$10.00, will risk life straining to save it — every possible situation of this glad life and all economic and sociologic problems of ours are more because of strainings than accidents, yet every attempt to strain produces many accidental subluxations that would not occur otherwise. Native gets sick because of accidental subluxations. Straining induces accidents, invites them. Ratio of subluxations from accidents in native and us, would be greater in latter.

Crime is a consequence of sickness, and law is a consequence of crime, and all leads back to subluxation. If there never had been a crime there would not be a law; if there was not sickness there would not be crime; and if there were no subluxation there would be no sickness — no sickness without subluxation.

In Japan, their lives back in the hills a tribe who do not know streets of city in its onward mad rush to civilization, who have a system of back treatment they call Lomi-lomi. This treatment is made upon the back bone, with use of a wooden ball from three to four inches in diameter. Notice, this tribe are NATIVES.

Navajo Indians have a system of treatment in which they take Scrotum of a bull moose, fill it with peas, beans, squash or melon seeds, pour hot water upon seeds to expand and fill bag tight. Sick man (or woman) is tied to a tree with back exposed; a strong buck, with his long thong in his hands, stands to one side and slaps it against persons back, starting at neck and going to sacrum. Man then is laid down, and in half an hour or an hour he is up and well.

In talking to Navajos in one of their pueblos, near Albuquerque, last summer, we said: "How long since you have used this method?"

"Approximately 60 years." "Why?" "The white man, he teaches medicine." "Don't you use this any more?" "None whatever." It took an old buck to remember it. Oncoming civilization lost THE NATURAL WAY—THE BACK BONE TREATMENT. This Navajo was a native.

You older natives of Sweden know that farmer comes off field tired at night; he lies upon floor; his child of six or seven walks up and down his back in bare feet. He lies a while, gets up and feels as fresh as upon awakening in morning. Only native Swede, living back in hills, does that; it is not educated, civilized university man in Stockholm.

Again, we have same condition existing among lumber jacks in almost all northern lumber camps—more especially around Quebec.

Blackfoot Indians of North and South Dakota had a system somewhat similar to Navajo Indians.

There is a therapeutical aspect to ju-jitsu of Chinese, which is that of back straining; lifting from under the arm-pits; raising and hugging downward; which has for its purpose "The cracking of bones in the back." Modern system of ju-jitsu which you think of as catch-as-catch-can or Greco-Roman wrestling, is its modernized aspect. Only such Chinese as lived back in "THE WILDER provinces" use this method.

Russians who live in Steppes of Russia or Siberia have a method known as Kropotsky, which has for its application treatment of backbones, that of tying a man with HIS BACK to tree, a native catching him on each side with each hand, and rolling him from side to side, pulling hard on each side; object being pressure of back-bones on bark of tree. We are speaking now of NATIVE. That is NOT used in St. Petersburg or Moscow, they prefer medicines and operations.

We refer you to Bohemians, these older natives who live in and around Prague. They have a system called Napravit which is that of straining, lifting, tugging, and working backbones for purpose of hearing them pop, to get their people well. There are many other systems which we have not mentioned. These are some that time has produced, and, peculiar as it may seem, these systems are not in vogue today; they are practically obliterated. Time has EDUCATED these people, and they are losing THE NATURAL METHOD of doing things. As civilization entered so did medicine, and sickness, and with them came crime, and with that came "Law." We are not saying, nor do we want to be quoted as saying these natural methods are more natural than Chiropractic or equal

to it. We are not sanctioning them as being scientifically correct or artistically applied, neither do we oppose them; but we introduce them here and now to prove that the native tended AND LEANED TOWARD such methods as directed them to backbone — the central shaft of man. Why people got well from these various backbone treatments, none knew. How a change took place they were as devoid of explanation as instruments used or a therapist today — but change took place and this demonstrated fact was sufficient to justify them to continue its use. Natural people have natural thots and acts — when civilization with its progression (?) dawned upon people, natural methods were relegated to past.

You perhaps are seeing why we say "Back to Innate; Back to Nature:" with same thot that multi-millionaire, disgusted with money, says; "Back to simple life; back to farm." "A good Indian is a dead Indian," although in Wm. Penn's time he was his FRIEND. See — how civilization changes?

Sanger says — and Sanger knows (she is today the world's greatest authority on question of prostitution, who has traveled world over, and lived with its every NATIVE tribe), and in her most eminent work on "The History of Prostitution" she says nearer tribe approached no clothing, the nearer she found unwritten shrine of morality. Where she came upon a tribe that had none absolutely — not even a breechcloth — where sexes bathed nude on beach, ate, cooked, lived and mingled in their councils, there she found morality supreme. But as soon as she came on the trouser and petticoat, just then did immorality creep in; and worst of all immorality, Sanger says, exists with those who live in silks, satins, and ermine cloaks.

Sanger gives this as scientific fact. We introduce it as a substantiation of our position of native life. Today what a contrast! We are civilized walking Stein Blochs. We are a nation of sexual perversities — not by choice but because of heritage. We are physical pigmies and mental nincompoops — not by choice, but because the world has been working itself that way. Our message — "Back to Nature!" is the reverse. Let us halt! "About Face!" We cannot deny we are degenerates and need regeneration.

Imagine an Indian; he could drink, spit and spat wherever he pleased; it made no difference. He could sup from a common drinking gourd; it was healthful. Today, WE are regulated and controlled to drink from bubbling fountain "for fear of germs," it is a "crime" if we don't. In Missouri State Board of Health would not allow a comb and brush in Pullman — germs would be carried. Indian could throw banana, orange, lemon peel, garbage any place

he pleased; it was all right; nothing immoral; nothing illegal about it. Go down on our streets TODAY, spit on sidewalk; drink from a public drinking cup; throw a banana peel on sidewalk; and you are committing a crime for which you pay "\$10 and costs."

These natives were humanely-abiding people. Now, civilization TREATS THE CRIME. If this analysis be true — and we should allow for the "if" — many economic problems confronting human mind, for instance, in which a man says "I am not getting enough of this world's materialities," when in reality he has all that he ever will be able to carry within him; in which he craves — yes, would do anything corruptible, to assume a high office, when in reality within him is office he will ever assume; he will do any crime, yet keep "within the law," and yet sometimes get into legal troubles. We believe many of these problems will be solved because we have SOLVED MAN; when we have made man free, his Innate is. Innate is not a miser! Innate don't care about cents and dollars! Innate doesn't care about being a Representative, Senator or President! Innate is not a politician. Innate regards no law other than herself. If we were walking examples of our solution, how many troubles would we obliterate!

Consider one phase — the "social evil" every city has. This will be adjusted when we have brought man and woman back to source where that has been solved for centuries — Back to Innate. "NATURAL LIFE" knows no social evil. These actions are considered immoral; then, they will be properly taken care of by Innate. Man, who has not yet regulated himself, cannot regulate another. When he is master of self, then he may master others, but when he has reached that stage where he is master of self he has no desire or intent to master others, he is satisfied when he helps them to help themselves, teaches them to do what he has done. No slave appreciates liberty, never having been free he knows but slavery. Only the free understand freedom. Only the self-master understands mastery, others are monopolists.

"Back to Innate, and know thyself;" then you will know others. Having regulated yourself, you will regulate others by letting others be regulated in the same way you are — each regulating himself.

You are going to rebut portions of this idea on ground that there is REFORMATION going on in world — what might be summed in "Reformation Argument." We reply because we think we can. Slavery and liquor questions — social evil; health question; moral and immoral argument; codification of statutes; tearing down, remodeling and multiplication of religious teachings; are changed every few years; constantly rolling upon themselves; constantly in evolving processes. We admit such is true. This fact

further is; reformation changes only as fast as does education; and education changes as do coerced and strained conditions. It is education on top and reformation underneath and vice-versa; and so pill revolves, each blending itself into other.

Judge Ben Lindsey says, "The State can never solve the far reaching problem of CRIMINAL REFORMATION until it abolishes method of jail and criminal court, with their evil spirits of punishment and revenge, and establishes in lieu thereof a system that will implant lessons of truth, honor, righteousness and industry that there may be a soul-awakening instead of soul-debasing."

Reformations are processes of treating effects. Reformations roll as often and change as completely as do physician's, lawyer's statutes, or viewpoints of our duty to God.

In health we change theory of medicine, diagnosis, and operation. How long has that been going on? Ever since medicine started.

Take slavery issue; we see them free in body and statutorily slave them, because of color and disadvantages. How long has that been? Throughout history.

In liquor, we go prohibition crazy; then we make blanket statutes that are sweeping, enforce them until they become continuous and bitter in county taxation when people refuse to permit prosecution and convictions; then we roll back again and have liquor. Last week in a Missouri town, one man was fined \$49,500 for selling liquor without a license, and judge suspended sentence under a promise that he would not do it again. He was convicted and set free. Strict enforcement of "law" works an evil; hence people dismiss it. "Law" people won't enforce is no longer "law," it's a joke.

We clean social evil district of a city; yes wipe it out; close up every house of prostitution and then what? We spread it into private boarding-houses; into private homes perhaps; and you don't know who your neighbor is. Before, you could tell. We prohibit by state such an institution as social evil, license it by city and protect it by police power at same time and in same state. True there is reformation going on, if that's reformation.

A certain woman has marital troubles. Her husband visits a house of prostitution, she finds it out, shoots husband. She is tried and convicted for murder. Pending trial she becomes pregnant in county jail, made so by the turn-key. Evil she took drastic measures to abort, is evil in existence in bastille where "law" is strictly construed and enforced. If that's reformation, then it's a process in action.

How long has social evil been under surveillance? It is trying to

be regulated and controlled back in Egyptian times. Scheme after scheme (treatment after treatment) has been tried and relegated — all to no end.

If man murders man, that is murder, says state. State condemns man for murder. State then murders murderer, and says that is right. State condemns murder when done by individual but sanctions it by statute when done by state. Murder IS THE WILFUL TAKING OF LIFE, regardless of who or by what means. We are unalterably opposed to capital punishment on ground that only Innate should take that which Innate can give. Life itself, should say when life shall cease to be. If this form of reasoning, conducted by statute, constitutes reformation we are progressing.

We incarcerate in penitentiary a girl who has gone wrong, and turn-key makes use of her body so she might get out in a shorter time for "good behavior." She is there because of a crime; she is paying debt, and crime is perpetuated in place where morality is presumed to reign. Does it abate issue any less that criminal tell her troubles to another? Suppose he or she would pay penance or toll to minister or friend, can it be that they have inside information of what God may or may not do to his or her soul when it comes marching on to Thon for review? Fact that they studied theories and treatments for years does not make them understand God any more. We have been a student of man all our life and may know every possible principle of life and death but that does not give us the inside track or make it possible to side-track errors committed; neither does God permit us to suggest or dictate to Thon what to do, when or how; we are still a servant same as sinner.

Suppose God were some high, big personage, running this world; he was a male being with anatomy like unto us except larger. Suppose we should ask for a special favor — to change equator to here in winter and in summer bring down North Pole — would He do it? Suppose we had an idea some person had been bad — functions went wrong — all his life — would our asking God to forgive be a success? It seems unreasonable for a 1-year-old to demand of his 50-year-old father what to do — and more unreasonable for a 50-year-old critter to plead, beg, offer incense, holler his head off, lay himself prone with deliberation, stand up, sit down, a few times, look imploringly at a stick of wood, thinking that all such will have some effect in getting this almighty Great and Good God to change His opinion on some detail he thinks ought to be changed. Does ant ask changings to suit its convenience? Can it be that God made this world, manufactured everything that was, is or will be in it; regulates where we come from, where we go and what we do while here; that He can hold endless planets in space

and then doesn't know enuf to put your misdeeds where they belong after you have committed them? Suppose you commit murder — don't Thon know it? Assuming he doesn't, you "take it to the Lord, thy God." You tell Him what you did, why you did it, and how, thinking He was asleep when you did it. After you explained all circumstances — which Thon already knew — you ask for forgiveness. If Thon thinks you deserve it, Thon will give it, otherwise not — and knowing all circumstances better than you such would be done whether or not you brot it to Thon. What you need is some smooth, soft, sweet smelling salve to balm your educated reasoning. That's as far as your desires should demand — further than that is solely and entirely within province of God. Do you call it reformation because you change the way to get at same personage with same intent in view — for Thon to change to your pleasure? If that's religious reformation — then it's going on.

Again, we have a system of stool-pigeon secret-service men in every city for purpose of detecting not only criminals but leading good honorable citizens into crime, to convict them of acts they were led into by stool-pigeon. State maintains a State Board of Health (?) (God forbid them) one duty of which is to have paid spies to lie, misrepresent themselves as being what they are not to trap unsuspecting well doer into acts to obliterate them from field of competition — here's another question of economics — and yet a question of "law" when trying to be controlled or regulated. Legal reformation (?) is going on; there is no question about it.

Every ten years, in many states, there is held a special session of legislature to codify and remodel statutes; to make weak ones strong, and if strong ones are drastic to dilute them; and then we make more to cover what we never before thot of.

PHYSICIAN says, if one medicine doesn't work let me know and I'll try another. LAWYER says, if this statute doesn't bring him about, let me know and I'll frame another that will. THE MINISTER never makes this appeal — his culprit must have FAITH while alive and must die to try out system. If it works he never comes back to report, if it fails we don't know difference and meanwhile we had satisfaction of believing.

Only a short while ago "Music was of devil" and never permitted during service. Today it is half the service — it induces harmony, altho today some churches still won't permit it. There are services of all kinds — if each is right then balance who do different are wrong. Same church will institute gambling devices and holler against saloon with something similar. If you say it's spirit of action then we reply it is as proper for us to stay home and manufacture

our own investigating turn of mind as to attend church and be twisted by others whom we help to pay to do same.

Theory of trying, testing and experimenting is continuous in every branch of three leading sciences. Medicine is an experiment, legal systems are uncivil and criminal practices, but patching up effects which break out in another angle; moral muck-raking and jumping from one false God to another is but a theorizing from one stage to another, never reaching a fundamental. To be ethical has its joys but to be right is better.

Theory of trying, testing, and experimenting is continuous in fails try another, seeming to prove unprovable hypothesis that a second evil corrects first. That is why Homeopath gets "law" to protect himself against Allopath; Eclectic protects himself against two; Osteopath against three; Christian Scientist against four; and, Chiropractors will make fifth evil, thinking it will correct, protect and abate crimes of four, in its time and place. Reformation (?) is unquestionably going on, and we help reforming.

We are forced to change what we thot right; we are compelled to divert what we thot wrong, and vice versa. We are not saying we are not progressing, we are along EDUCATIONAL lines at a remarkable rate of speed. We are not saying all of this is wrong. So long as everything is judged by educational standards these are proper things to do educationally. But we question whether or not purport of educational system is fit. Our message brings to you natural system in preference, believing when that is established educational system will gradually diminish and educated evils abated with them.

If these things we have said represent facts, as they are at present existent, if that constitutes reformation, then amending IS A FAILURE and UNSUCCESSFUL.

"Failure" and "unsuccessful" on the ground there are same kinds of diseases in existence today as in early Egyptian times. Quantity of disease has not been abated, same characters exist, neither has their severity been diminished. Millions of minds, millions of bodies have been dissected dead and alive, millions of inventions have been patented and used; millions of prescriptions compounded, tried and thrown away — useless. Health of world is no better than it was; in truth, worse. Those natives who know no doctors are in better health than educated fools who do. Old woman who knew no doctor had a stomach ache, now it's appendicitis. Sickness has become a financial graft. Where has scientific, therapeutical reformation improved us? We don't see it and there exists no proof of it.

"Pure Food and Public Health"

"WE REAFFIRM OUR PREVIOUS DECLARATION advocating union and strengthening of various governmental agencies relating to pure foods, quarantine, vital statistics and human health. Thus united and administered without partiality to our discrimination against any school of medicine or system of healing, they would constitute a single health service, not subordinated to any commercial or financial interests, but devoted exclusively to conservation of human life and efficiency. Moreover, this health service should co-operate with health agencies of our various states and cities without interference with their prerogatives **OR WITH THE FREEDOM OF INDIVIDUALS TO EMPLOY SUCH MEDICAL OR HYGIENIC AID AS THEY MAY SEE FIT."**

(Quoted from Democratic National Platform) (1912)

"Failure" and "unsuccessful" on further ground there are same legal problems in existence today as in earlier history. Quantity of cases to be tried in our courts is appalling; they have multiplied. Technicality is criterion of losses or wins, not justice. Financial interests form legislation. Same crimes against state and person exist as in former times. Endeavors of every character, statutes galore, courts of every kind, means without limitation, and world is no better than in previous years. Our statutes are a hundred-fold greater; every citizen is an inhabitant in our institutions who fill them. Growth of crime is greater than growth of our population, in ratio. Statutes do not accomplish their mission — they are alleviations and palliatives, they soothe and paralyze, they treat effects, they do not cure.

"Failure" and "unsuccessful" on continued ground that ministers can no longer get audiences to believe their myths, cannot hold rapt attention of congregations which are on decrease. Their sermons no longer gather multitudes. People of this age and time will not believe ministers sincere for they advocate impossible things to inattentive audiences. It is not real. There is more life and truth in a baseball game or fishing excursion.

Number of religions have multiplied until hardly a day passes but another sect and creed is given birth. People try one, forget, and seek another — all hunting for the Happy Hunting Grounds and THE ONLY key to its unlocking. People are truth seekers; they concede only truth, acknowledge only fact and destroy that which is contrary. Ratio of church adherents compared to growth of religions and population is decreasing. This is an age of investigation.

On common rights of man to appeal direct to God for his religion, rather than thru intermediate, to which we raise an objection, we note following comments in Thomas Paine's "Observations on Rights of Man." P. 141 of 4th volume of Revolutionary Edition of his writings: —

"The seventh, eighth, ninth, tenth and eleventh articles, are declaratory of principles upon which laws shall be constructed, conformable to rights already declared. But it is questioned by some very good people in France, as well as in other countries, whether tenth article sufficiently guarantees right it is intended to accord with: besides which, it takes off from divine dignity of religion, and weakens its operative force upon the mind, to make it a subject of human laws. It then presents itself to man, like light intercepted by a cloudy medium, in which source of it is obscured from his sight, and he sees nothing to reverence in dusky law."

As a footnote we find: — "There is a single idea, which, if it strikes rightly upon mind, either in a legal or a religious sense, will prevent any man, or any body of men, or any government, from going wrong on subject of religion: which is, **THAT BEFORE ANY HUMAN INSTITUTIONS OF GOVERNMENT WERE KNOWN IN THE WORLD, THERE EXISTED, IF I MAY SO EXPRESS IT, A COMPACT BETWEEN GOD AND MAN, FROM THE BEGINNING OF TIME; and that as relation and condition which man in his individual person stands in toward his Maker CANNOT BE CHANGED, or any ways altered by HUMAN laws or human authority, that religious devotion, which is a part of this compact conform to laws, which besides being human, are subsequent thereto.**"

Let us view health point. If we call things we have cited reformation, we say same **PRINCIPLE** of therapy — which was **THE TREATMENT OF THE EFFECT** — is in vogue today same as in 3000 B. C., or 100 A. D. But you say "reformation", of course. It is from pepsin to renenogen, and from peptonegen to rennet. We are reforming but **ALWAYS** upon **THE SAME PRINCIPLE** — something from outside to go inside. We can't call that reformation.

Look at still another phase. We have same idea of an **INTER-MEDIATE** something outside which will come to our rescue and give us thing we think we must have in times of trouble, when our morals are striking our consciences. "If we just had a stick of wood, (shaped as a cross) in our hand, we would feel we had some confidence in something! If we could look upon a bone blessed by a saint, or some blessed water — or a minister who has been ordained who will intervene with God for us. Something which gives us strength."

System under which every organized and systematized religion is conducted IS THRU THAT OF AN INTERMEDIATE. You pray to Jesus, and yet no where did Jesus hold himself up as an example — he said "Honor thy Father," referring to God. He taught us to appreciate God. He was but a man trying to teach. This same viewpoint is true of all theologies. Lodges recognize God. For that reason lodges follow a truer religion than churches; one omits intermediate and takes you direct to source, the other makes you believe in divinity of an intermediate before you can reach cause.

Medicine legally forces you to believe in pepsin, AS AN INTERMEDIATE, before you can get well. Legislation by police power with pressure insists you believe in statute, AS AN INTERMEDIATE, before you can get justice. Church by social ostracism demands you believe in Jesus, Mohammed, the Pope or Czar, AS AN INTERMEDIATE, before you can reach God. Don't misunderstand us to say we deny that there is no property in pepsin. It was good for fellow who made it. Same is true with statutes — they're good for those who framed and passed them; were so much spleen in his system that he used as a business to give vent to. Neither do we want you to understand that we deny divinity of Jesus, but we are condemning in no uncertain terms way mankind has twisted truth He uttered to way we dope it out today. Fault is not with Jesus, it's with people. Jesus prayed on highways — today you must go to church, pay a stipend for pew rent to do same act.

Education fixes standard and by education are you judged. Mass believing in medicine — then to deny its principle or application is to be condemned, by that standard. All people believe in theory of statutory regulation and controlling, hence to think otherwise is to be heaped with abuses of anarchistic designs. Every nation follows a religion — to not be a theologian is to be eternally damned all of which we will run chance of believing; but not content to damn under their breath they proceed to follow Christ-like principle of heaping calumny, abuse and business ruination upon those who think, all because we don't desire to reach same place in same way they are pleased to think they are going. Hearsay of today is orthodox of tomorrow. The Deist of today is leader of future, all because standards of education are modified by knowledge of conditions. Education today is but theory of another day and so do we view knowledge in retrospect as but education.

Sickness, physician, medicine — physician and medicine intermediates. Innate, man, health — no intermediates.

Sickness, crime, lawyer, statute — lawyer and statute intermediates.

Sickness, immorality, Divine person, minister — divine person and preacher intermediates. Innate, man, morality — no intermediates. God is in man — no need for physician, lawyer or minister. God is not in medicine, statute or a book. Physician, lawyer or minister are not needed more than are medicines, statutes or books. To listen to physician teach medicines, lawyer statutes, or minister the book does not assist God within to reach ourselves. Some Chiropractors do not preach God within ourselves — they preach what others say in a Book, doing which offers an obstruction — to adjust a cause is to let God within become God without, without advice or being asked to do so.

Principle is same in all — no difference and all are wrong. God is source of health, law, divinity (if there is such) then to Thon must we go for it. Doctor, lawyer, preacher is an intermediate and not necessary. Health courses within us regardless of where we may be. Same is true of law and spirituality — it is not necessary we go to doctor's office to take our pill, to court house to get justice, or to a church to pray, yet educational scale of today says we must or our endeavors are failures.

If we desire health it is within us, anywhere we may be; this is true of law and God. We can pray in cellar, garret, woods or prison — church and court house and doctor's offices are as much unnecessary intermediates as are officials themselves. Always looking to counsel of somebody else; to OUTSIDE forces, when only force that gives confidence, in times of trouble, is within. THE SAME PRINCIPLE still is. It was there long, long ago; it is with us today. Reformation! Yes, we are reforming therapeutically, legally and religiously every once in a while, but always with same principle, which is not changed. Strength, health, righteousness and moralities; they are always outside, and you look outside for them. IT COMES FROM WITHIN.

If this statement be true (and that may be open to question; to us it is true.) WE ARE STILL TREATING EFFECTS IN HEALTH, LAW, MORALS. Cause? No, it was never adjusted in diseases; in immoralities; in legal difficulties; because man never knew himself, and he did not know he was carrying internal vertebral subluxations which induced these inside effects which he externally treated; never knowing himself, how could he adjust others?

"Theology, Medicine and Law"

"This trio of professions constitutes the millstone hung about the neck of modern civilization."

"Theology tries to convict world of imaginary sins, at same time it belittles conscience and disparages reason."

"Medicine attacks foundation of health and right living with poisonous drugs, while it discourages God-given remedies so abundantly supplied by nature."

"Law throws its arms of protection around criminals of every species while it persecutes innocent, and lays in wait for unwary."

"Theology, Medicine and Law. First attacks soul, second body, and third debauches innate laws of justice."

"Theology is natural enemy of religion. Medicine natural enemy of health. Law the natural enemy of justice and good order."

"Theology had its birth in hatred of true religion. Medicine was born of distrust of nature. Law had its origin in deliberate disbelief in natural goodness of man."

"If a man finds himself in doubt as to his duty toward God and other men, let him apply to theology where his doubts will be doubled, and his suspicions be multiplied."

"If a man becomes afflicted with some bodily infirmity, real or imaginary, let him apply to doctor and he will soon find himself facing a thousand ailments where he first had but one."

"If a man has trouble with his neighbor, let him apply to lawyer when he will soon find himself involved in every species of contention and new troubles springing up on every side."

(The Columbus Medical Journal, Sept., 1912)

If our assumption is right, we have a message to give to this world; which is logical, consistent, necessary, sound in construction and practical in application; and that message is: Reform the three nonessential systems of treating effects! Adjust cause!

If we could adjust vertebral subluxations of insane, murderer, criminals, these downcast social evil doers; what could we do? That constitutes a message never given world before: ADJUST THE CAUSE! — Don't treat effects! Let Innate come from within!

We permit your doubt on one question, because you hold it; and it will save us criticism upon your part, because we think it ourselves; and that is: Whether educational system is entirely to blame, or whether our destiny has been side-tracked because of perverted functions following products of strained or accidental subluxations in original native with his pure life, or not, we are not quite ready to say. Fact remains that man has worked — and laboriously at that — FROM HIMSELF; has toiled towards false

sources (and secured false Gods) for things he possesses in abundance, but never knew. That is biggest joke pulled off on man by man: He bewails his loss of health, and he has all he will need in his brain where he should THINK. He laments his loss of morality, and he has perfection within his cranium. He rues burdensome statutes, and he has all law he will ever want in his noodle.

But there has been one redeeming feature. There are three lines of thot that take man TOWARDS himself, and take him good and proper. We refer to music, art and literature. Music brings tears to hardened criminal; brings a man's "stomach into his throat;" makes feet jingle when he is determined they will keep still — "Music hath charms to awaken savage breast" — makes rattlesnake lie still, cobra show his head, hypnotizes lion, draws soldiers into battle and makes heroes of cowards. Art — as in paintings — appeals to inner man. As an example; in Corcoran Art Gallery, (Washington, D. C.) you will find a painting of a boy, bare feet, torn trousers, blue shirt, stubby hands in suspenders, in an attitude of yawning. All the time you will find people there gaping.

And literature! You THINK to read: These three thots have kept humanity on apparent balance and from going to extremes on "Away from Nature!" Music, art and literature; there is nothing to treat, doctor, or appeal to beast — IT DRAWS OUT FROM WITHIN and only good can come from that process. Hence there has been no treatment of effect in these. They draw us towards ourselves, consequently we appreciate them. To esteem is to execute; and to accomplish is to draw out of ourselves, to make ourselves greater because of process of drawing. But converse is true with medicine, our system of morals, and "Law," for in these we aim to improve by multiplying or increasing external voluminousness of them.

Man is our objective principle. He has gradually forced himself away from himself, because we are today living in an artificial age, it is far from natural. Only the musician, painter, and poet gives vent to his inner self. He is a freak, a monstrosity, also is a perversity compared to general run, but it takes a musician to bring tears of joy or sorrow. It takes artist to paint picture that goes down thru time; it takes literary genius to leave thots that inspire men to greater deeds. These people live within themselves; they are "chosen people," are imbued. Could a millionaire be inspired because he took in three million dollars as profits for turning over thousands of bushels of grain? No; but an artist, not knowing where his next meal is to come from, strolls by the babbling brook in early spring, it thrills him. He breathes inspira-

tion, and transfers it to canvas. Former is forgotten, latter lives. Our physicians, moralists and lawyers are morbid and mercenary; all looking to greed and gain issue. Music, art and literature have been anchors that held man from going daft, growing lopsided on other three viewpoints, although even those are fostered nowadays for benefit of other sciences, not for their inherent constructive principle, but because of fame finance makes of it.

When we mentioned names of business men, we said they turned over matter, they improved man's usefulness but they never bettered man. Their message was great — no denying it. There is another era of a health, law and mortal message to come which will be greater — "Back to Innate."

Those philosophers answered question why. Philosophy must entertain three essentialities of FORCE plus MATTER plus TIME in which this is done. All ideals are immaterialities, therefore music, art and literature are forces working thru matter, our bodies. Innate is your and our ideal. Philosophy is to talk idealistic viewpoint. Innate is spirit of philosophy for you and us; it is our philosophy as anatomy is our physics; neither of which can we deny. There would be no philosophy without physics, and no physics were it not for philosophy. But it is going too far to say that medicine, "law", and morals are the entity and only physics we must entertain. Two must go together to form a living unit, they must blend so that one loses itself in other, and vice versa, so two are one.

If man goes to one extreme or other — talks entirely of ideals or physics, the pendulum goes too far. Man's world has already swung its pendulum too far in treating effects, that is why we are "physical pygmies and mental nincompoops." It is not our fault. Our EDUCATIONS should begin changing with our great grandparents, our knowledge can begin at once.

We live in a contradictory age. We are product of Innate, Innate is our producer. When we want more product we go to something outside of our Innate producer for it. The health we retain comes from Innate; when we want more we get ragweed. Morality we possess comes from Innate, desiring more we go to another like ourselves. Coveting justice it is applied by misconstrued opinions of an equal. Instead of going to essence of throne of justice, we go to a court of injustice.

One hundred per cent man is at a premium. He is scarce. One hundred per cent man gives unto Innate justice, morality, health; that man is right. "Render unto Caesar those things which are Caesar's, and give unto God those which are God's."

Joe and Esther Strand were being tried for practicing medicine and surgery, contrary TO LAW at Fayette, Mo. In his opening argument to the jury, the Prosecuting Attorney said, among other things: — "Gentlemen of Jury, if Jesus, the Great Healer, were to return to earth and desired to heal sick, restore sight to blind, make lame walk, the halt to run, leper to cure and to raise dead — and I say it all reverently, Gentlemen — He would first appear before Missouri State Board of Health (?) and pass an examination in all common branches of medicine, such as bacteriology and surgery before He would attempt to save a single life by laying on of hands."

During this argument we were told that two evangelists, who were conducting revival meetings in city, were in court room and heard this argument. At noon, Mr. Morris, (our National Counsel) our defendants and ourself, were invited to lunch at home of where these evangelists were guests. During course of meal one evangelist said, "You are a law-breaker, are you not?" Addressing himself in a sneering manner to our defendant. We asked if he heard of statements of the Prosecuting Attorney. He replied he had. "Would Jesus do this?" we asked. He hemmed, finally making no reply. We pressed question — hostess to break oppressive stillness, mentioned that "Bro — was not a lawyer." It was not a legal ruling we wanted, but a theological one. He still held silence. We finally asked if he knew what "law" was, to which, he made no further reply. We then offered one — "Common law is common opinion of common people upon a common subject." He agreed this was well taken. We then referred back to when Jesus was on earth — did He or did He not break THE LAWS OF THE HEBREWS AND ROMANS? He did and because He did was crucified and given a crown of thorns. He finally admitted he was TODAY asking "sinners" to pray to example of a "law-breaker" at his meetings.

While in Akron, Ohio, on a recent trial we looked into a legal dictionary to find LEGAL definition of "law." It was "Fixed, eternal, everlasting, stable, constant, absolute, facts of nature," etc. Are statutes "Fixed" — are they not changing daily, annually? Is medicine an external, everlasting, stable, constant, absolute, facts of nature," etc.? Does it not substitute its guards daily; is not man experimenting with man and woman chemically and operatively to "find out?" Are our religions and their viewpoints STABLE facts of nature? To none of these can we answer yes. Our message brings back to you premise that there is a basis, so practical that it can and does have a philosophy, science and art, that agrees with every phase thereof, not only of life itself but facts connected therewith; and not once does it dispute a single premise, nor are

you asked to believe anything that contradicts nature as Thon is and as we know it. Neither do we ask you to dispute any well known and proven absolute knowledge. The given knowledge has never changed, because Thon has not changed. If man has mistaken thots, that is no reason why we must be tied to them. We question only man's viewpoints, not God.

Religions are ideas of philosophy. To religion there is no science or art. "Law" is a theory of administration; it is question of local practice, hence is but a science and art — it has no philosophy. Medicine has no philosophy, neither is work done according to a scientific premise, and results (or lack thereof) prove it is not art. Two former work in antipodes, latter having nothing to recommend it. Because of absence of science and art, philosophy (even if correct) of religion goes begging for demonstration. Because of having no philosophical reason why, science and art of "law" lacks justice in delivery. Because of no reason, no method and possibility of doing, medicine is a folly. Chiropractic embraces a philosophy which establishes reason why for things concrete and abstract, therefore pursues an equivalent practice in why to do every act given, thus when work is done it proves accuracy of that which preceded. Every principle and rule of Chiropractor blends itself with every other phase, why, how and doing are each true unto each other — establishing a truth.

In substantiation of this premise let us cite this example. If Good Book is true, we read that "Jesus cured people." What disease does not matter. He must have done so in conjunction WITH law not opposing it. If He permitted a cure to occur by accidentally letting law act, then that is not science nor is it art. We hardly desire to concede that Jesus' acts were accidents, altho we have no proof they were otherwise. But we do believe people got well — therefore law was effective and accomplished its mission.

CONSTANT of life, health, morality and law is that God enters man in form of Innate Intelligence, passes thru spinal cord, rami-fying to all parts of body in form of mental impulses. When they reach organs there will be health, law, moral abiding — that is our message. If that fact is true — and it is demonstrable — then the Chiropractor is working according to law when he adjusts sub-luxation. And who is to gainsay that "the laying on of hands" was not done according to this now well known law of health? Who is to deny that Jesus did not do exactly that kind of work. We do not question statement of fact — we do tho think Good Book does not tell us all we should know about this subject. No blame can be fixed and, it's a question whether there is censure due. Men in those times were superstitious, they wrote what they re-

membered years after of things as they occurred. Memory is defective, highly so when educated piffles with superstitions and myths. One whose life is based on such could not retain all of a demonstrated truth, his recitation thereof would be prejudiced and modified by previous educational memory. As to spitting on mud for blindness, maybe and maybe not — if done, it could be accounted for same as a physician advised fresh air, sunlight and baths and gives a bread and water pill. Patient believes pill cured. If patient told about pill to second and third party and they eventually wrote chapters thereupon naturally fact is vice-twisted.

If it is a fact that blind were made to see — so do we. He got halt, lame, to walking normally — so does Chiropractor. He healed leper, so could we if given opportunity. And as to "raising Lazarus from the dead," we have known cases adjusted by Chiropractors having been given up to die and got well even to one case where in coffin eighteen hours and restored. (In using terms "He healed the leper," etc., we do so advisedly well knowing that even Jesus could not usurp His position as a man and do work of God. Neither can Chiropractor. He or we can but get man to a condition where law can work. Edt.)

Law is law — it is fixed, eternal, everlasting, stable — hence does not change because we do. Its that is permanent, ours fluctuation, unstable, up today and down tomorrow. What is law today was same then. How far then can we agree that Jesus but did then what we do today or vice versa? Is it inconsistent to assume that history repeats itself?

Civilization induces sickness because of forced position we assume in life; sickness consists either of a disease of educated brain or body, and it doesn't make any difference which, because either may produce a stationary crime. Crime induces two forms of treatment — note term "treatment." First, trial by statute, PRESENT punishment, which is physical and is given in penitentiary. A second trial by religion, FUTURE punishment, which is spiritual and is applied through sacrifices.

Civilization that induces sickness produces subluxation; and civilization or subluxation also instigates treatment. There is where your and our paths diverge. Hence our message brings forth a new phase of old ideas — that natural living, back to Innate, reduces the subluxation, increases flow of law, morals and health and takes us back to only one cure.

Chiropractic makes man WELL; being well he will be NORMAL, being normal he will be MORAL and being moral he will be LAW-ABIDING; all because subluxation was adjusted. "For want

of a nail" — same old story. For want of an adjustment — worse things can occur.

Message of yesterday and today, of man whose names we have given — and others that might be added, which includes lawyer, preacher and physician — is that of class, it is restricted, controlled and regulated to their use for a purpose, and that is evil. We don't object to any class doing anything with any class so long as class wants it but we say: "Don't get a monopolistic grip on mass so that nobody can improve upon reason, manner or method; and yet, isn't that position physician, lawyer and minister assume today? He revolves, yes, he reforms THE ORIGINAL PRINCIPLE without changing it. It is one with one exclusive and inclusive way.

Supposing we introduced a LAW school — what kind of reception would we get from attorneys? Suppose we say, "Your schools teach statutes, their interpretation and application are as bad as medical schools that teach materia medica, diagnoses and prescriptions, therefore a new school is necessary — where LAW of God is interpreted and applied by man to himself" — what attitude would he assume toward us? To study law more and statutes less is to induce justice of units of men hence more to the multitude. He will promptly inform us that "Justice be damned! We are here to try cases according to statutes — they are law of land." And then proceed, in spite of a more reasonable assumption. No welcome reception for restoration. It is out of beaten principle.

You, who don't know, say "If you have something better they will gladly accept it. All they need is to be shown." As much might be said for medicine. Chiropractic IS better, it has been proven on hundreds of thousands of cases. Do Medical Associations welcome it and urge us to demonstrate and prove?

But message of today, if you please, being constructed for use tomorrow — that of Chiropractor — be it a class if you will — is for mass; for universe, from universe; it must go back to it. It is composed of those things which are effective, because they do go back to causerie.

If this message be rightly founded, it means this: medicine, our system of morals and jurisprudence will be revolutionized by adjusting origin from which they came.

How broad is this message? We adjust subluxation. Subluxation exists in spine. What breadth of application for spines! Here is canine, equine, bovine, feline. There are simian, and human families and others we might mention. All have spines; all have subluxations and all need adjustments. Our message is broad enough for all, each in its respective way.

In P.S.C., as we view it, one-ninth of our message is being taught. There are three divisions, as we have noted — (A) health, (B) law, and (C) moral questions. Health question (A) is one-third division being discussed with you; out of that one-third, there is one-third to which you pay particular attention, ART of adjusting subluxations, and that is merely (3) art of (2) science and (1) philosophy.

Health question divides itself into three phases, — art, science and philosophy. You pay particular attention to art or anything auxiliary. "A new way to punch back? Give that to me quickly! I must have it. Where is it?" Art! That is burning question of your age. Science? A very little goes a long way. Philosophy Nix Cum Raus!

Here is law question (B) which, with its many difficulties, should be propounded; it has three phases, — art, science, and philosophy. And, so has moral question its art, science and philosophy.

Our message is for world, which includes vertebrates as stated; each of these families needs what we can give. This message consists of thot and act that men do, and it knows, in our opinion, NO ARBITRARY LINES where we shall begin and stop. If we made any it would be arbitrary, domineering and empirical. Same should be true of you. We feel it our province to think anything man may think; it is our duty to solve problems that man's mind considers a problem, there are no restrictions. We are getting out of life what life gives to us; not taking what we pay dollars and cents for. We shall take all we can get of any thot, we care not where it hails from — its color, shape, form or size — that our mind is able to grasp — and that is not much, but we are making it more. We have not endeavored to build a fence and say, "Here will we pasture and not outside." Thomas Paine said "The world is my playground. To do good, is my religion." Even newsboy might tell a good thot, and it would be good. And that is why we draw no irresponsible lines as to source of character.

Take this unto yourselves please; make of it a personal application. You say you came here to learn "Chiropractic, that is to adjust subluxations to get people well; to eradicate sickness; to bring health back to their bodies, for which we receive a liberal fee." That is true, but why cease there? Sickness, begets crime, crime is product of disease, statutory regulations and controllings we have today were begotten of crime — all lead to subluxations; and we wonder why you restrict yourselves as to how, where and when.

He who is immoral or is illegal, is sick — and we don't seem to get far from that point. He needs our message of adjustment as

much as man who has indigestion. Students, at large, restrict our message to that portion which you want. World needs it all. We are not alone in our characteristic desires and give what mass cries for — which is this idea of going back to nature, back to Innate, and letting current flow from within outward to make a better world.

World needs our message of health, which you accept, as a body, in one-third. There are statute lectures which you accept because they fight you; therefore you must know something of how to rebut its evils. Some day you may have to face it and it will be better that you know more. We long ago ceased to consider that selfish viewpoint. It is a problem; we have a solution; it will be changed.

As we are today upon threshold of throwing into ditch therapeutical systems of dopes, poisons and operations, we are beginners, as pioneers in that movement, so will we establish, sooner or later, a system of law and morality which will have same common source. It may seem far-fetched, as all new and radical systems do, only because we do not fully comprehend them or see them fully, generally and permanently in use.

Moral question you taboo by saying it has no part in Chiropractic. We grant this; (from your viewpoint) and if you had your choice neither would law be any part of Chiropractic; but by good fortune you haven't the making of actions of courts or prosecuting attorneys with unjust subject. If you could shoulder more with third issue, you would agree more that we are right.

We prophesy — time will come when this message of knowledge from within will establish three schools. 1st, a Chiropractic moral; 2nd, a Chiropractic law; 3rd, a Chiropractic life school. Then it will immediately disintegrate three and merge them into one, because one they are. One it is today, and that is Innate; why try to make it three, for it is not, never was, and we cannot make it so. It is individualistic; it is "I" or "ours."

If you have followed us, this message is larger than any business men, teachers, philosophers or reformers have given unto world — and we say that modestly. Import or application, what it tends to do, the way it will accomplish it, will be greater than anything these men have accomplished. This is largest message man has given to man, altho universal intelligence is giving it all time. We have it within us and have had from time we were born; did not know it; and little of it do we realize today. Man has misapprehended man long enough. It is time we understood each other. Man not knowing himself, could not know others; not understanding his own weaknesses and their causes, he could not know the

causes of weaknesses in others. Then he began treating himself when sick, when morally unethical, then legally wrong. How could he see others other than as he saw himself?

Vegetable kingdom you say, has no need for this message, because it is based upon vertebral adjustment, and vegetable has no spine. You are right. Animal kingdom — of which you are taught today we are not a part, we are above animals, are of a higher type, same as chimpanzee is not an orang-outang, of course; BUT they are both monkeys — has no use for that portion of our message which has to do with law, for cow may spit any place and it is committing no crime. It has no immorality; spreads no disease — it commits no crime, and if it does cow doesn't know it. It is hurting nobody — at least it doesn't hurt cow; and what cow doesn't know doesn't hurt; so cow doesn't need that portion of this message on morals; neither does it need it on question of law, for with cow, if it spits in field it is no crime for which you could jail it or give "30 days and costs." So it does not need our law argument; but it still needs adjustment for health. Because man domesticates that animal then man has brought it into age of civilization, and civilization presents artificial, strained life; and cow that works under yoke produces subluxations. So it is with horse and mule. Animal is alike to man, naturally subluxations would be results of accidents; educationally speaking tho, he is subject to subluxations of strained life, as is man when man introduces animal to same or similar states of existence. Turn man and horse loose, back to nature, and neither would strain. Introduce both into a city and one strains to load wagon while other strains to pull it; man strains to build a 2-story barn and cow strains to go up incline. Civilization introduces domesticity which brings on strains, etc. Leave them to themselves and they will work back to nature.

Fannie, our Collie, rolled back and forth on her back. We quietly went up to her, she had a certain portion of her backbone on a brick that stood up in road like a bump; there she was rolling over bumpy brick. We palpated Fannie's back, found a subluxation, it was tender. Fannie had tender subluxation on bumpy brick on street. Take a horse out of harness, turn him loose in pasture, first thing he does is to get down on his back, roll, whinny, adjust himself and proceed to feel good.

Give us native. Back to nature! Back to Innate! That Collie was prompted, not by civilization, education, or domesticity, but by Innate to do what it did. But man needs to interpret himself on all three of these questions. Why? Vegetables are invertebrates, hence follow natural system. Animals live natural system IN

MORALS and work TOWARD LAW. Man takes himself FROM system in every phase.

We are working today FROM law, thinking to reach it; we are working FROM health, thinking to grab it; we are working FROM morals, thinking to become immortals; and further we get FROM it nearer we go towards it; nearer we get towards it further we get from it. This is a living age of antithesis; we should think in antipodes, act in opposites and get right. When a physician says: "Salts will move the bowels," say "No, the bowels will move the salts." When he says, "This medicine cures and gives health." "No, he will give it to himself." When a lawyer says: "Go to statutes, courts and court houses for justice," say "No, the farther you get away the more you find." Take the opposite of today. We are told health is in pill, law in statute, morals in church; none of which is right.

Please do not misunderstand us to say opposite is found, in practice this is true, in theory no. Much good exists in each of principles, but no good can exist in system that is wrong fundamentally. We condemn not people, they are frequently good in spite of wrongness of system — this but proves our message more — it demonstrates that Innate works to elimination of wrong, from within, notwithstanding education desires to fasten an evil on from without. Innate makes these people what they are, in spite of their educated perversities.

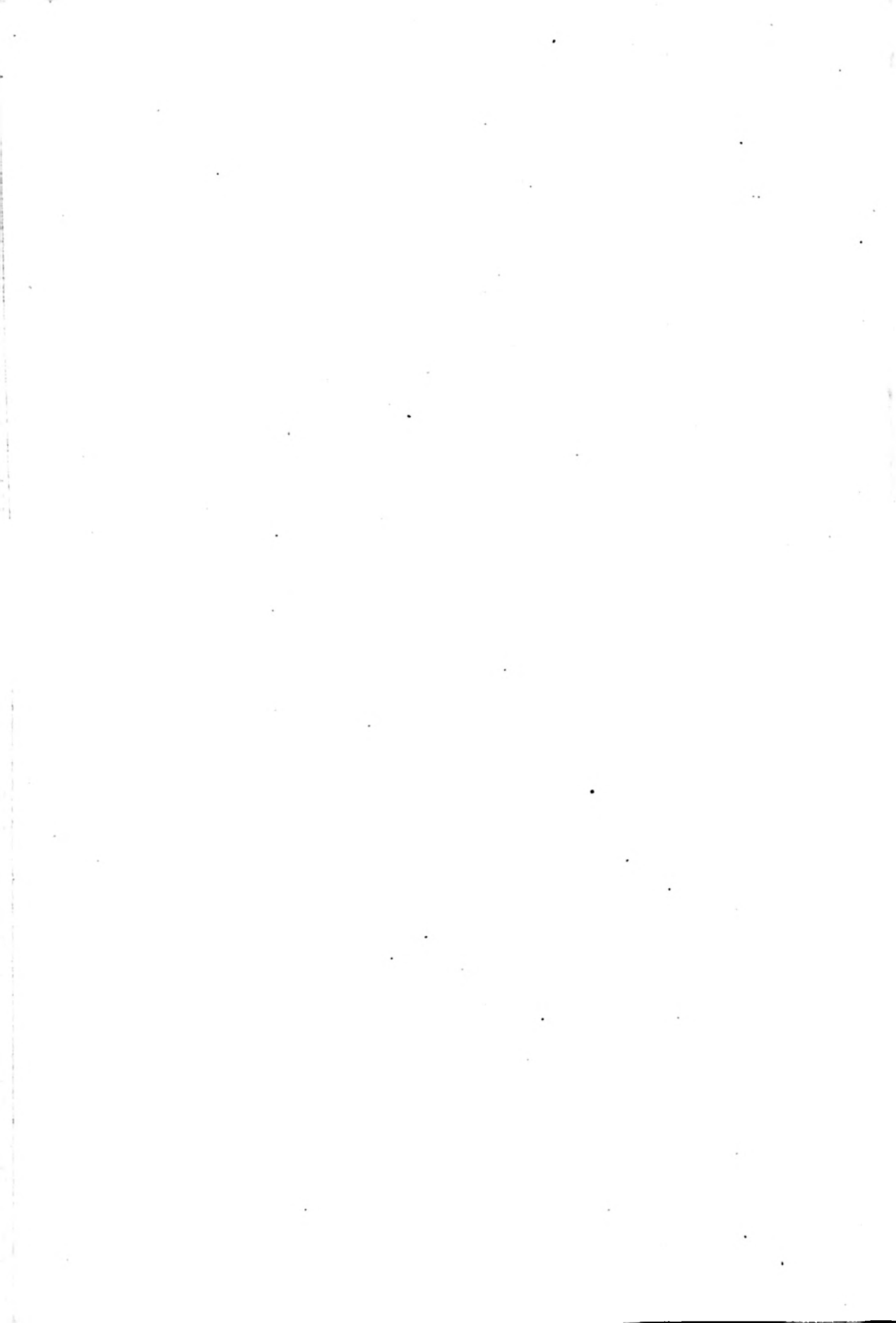


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